

P17000071020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

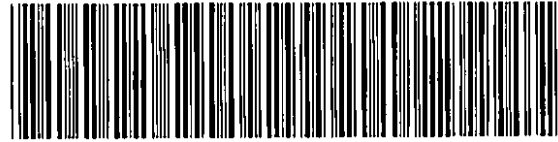
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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: James Empire, INC  
Name of Corporation

DOCUMENT NUMBER: 917000071020

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Devon James  
Name of Contact Person

James Empire, INC  
Firm/Company

819 N. Rainbow Drive  
Address

Hollywood, FL 33021  
City/State and Zip Code

djames30711@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Devon James at ( 917 ) 361-4119  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: James Empire, Inc
2. The principal office address: 819 N. Rainbow Drive  
Hollywood FL 33021
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 8/23/2017 Document number: P17000071020
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Devon James  
2900 NW 183<sup>rd</sup> Street  
Miami Gardens, FL 33056

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TALLAHASSEE, FL  
DIVISION OF CORPORATIONS

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Devon James  
~~2900~~ ~~183<sup>rd</sup>~~ 819 N. Rainbow Drive  
P.O. Box NOT acceptable  
Hollywood FL 33021

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

DL James

Signature of an officer or director

Devon James / President

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

DL James

Signature of Registered Agent

10/31/17

Date

If signing on behalf of an entity:

Devon James

Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314