

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: J ORTMAN INC
Name of Corporation

DOCUMENT NUMBER: P18000030702

The enclosed Statement of Change of Registered Office/Agent and fee are submitted
Please return all correspondence concerning this matter to the following:

HEIDI ORTMAN SHEFF
Name of Contact Person

J ORTMAN INC
Firm/Company

~~3021 NW 39TH STREET~~ 320 PLAZA Real #305
Address

BOCA RATON, FL ~~33434~~ 33432
City/State and Zip Code

heididesignz@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heidi Ortman Sheff at (914) 643-1553
Name of Contact Person Area Code & Daytime

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
The Centre of Tallahassee
2415 N. Monroe Street. Su
Tallahassee, FL 32303

CR2E045 (04-13)

Thank you
H. Ortman Sheff



2021 OCT -4 PM 1:53

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 7, 2021

HEIDI ORTMAN SHEFF
320 PLAZA REAL #305
BOCA RATON, FL 33432

SUBJECT: J. ORTMAN INC
Ref. Number: P18000030702

We have received your document for J. ORTMAN INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

All we recieved is the cover letter of the document. Please resubmit and include the entire document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 521A00021521

*Sorry - I never recieved the 2nd
page from my accountant.*

Thank you H. Ortmans

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: J Ortman Inc
Name of Corporation

DOCUMENT NUMBER: P18000030702

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:

HEIDI ORTMAN SHEFF

Name of Contact Person

J ORTMAN INC

Firm/Company

320 PLAZA REAL #305

Address

BOCA RATON, FL 33432

City/State and Zip Code

heididesignz@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HEIDI ORTMAN SHEFF at (914) 643-1553
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: J ORTMAN INC

2. The principal office address: 320 PLAZA REAL #305
BOCA RATON, FL 33432

3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 04/03/2018 Document number: P18000030702

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)

BLUMBERG EXCELSIOR CORPORATE SERVICES INC
155 OFFICE PLAZA DRIVE 1ST FLOOR
TALLAHASSEE, FL 32301

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

HEIDI ORTMAN SHEFF
320 PLAZA REAL #305
BOCA RATON, FL 33432
P.O. Box NOT acceptable

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.

 Heidi Ortman Sheff, President
Signature of an officer or director 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.

 Sept 27, 2021
Signature of Registered Agent Date

If signing on behalf of an entity:
Heidi Ortman Sheff
Typed or Printed Name

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