## P190000 12221

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

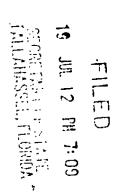
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## **COVER LETTER**

	ent Section of Corporations	
SUBJECT:	Jonal Roylan PA. Name of Corp	oration
DOCUMENT NU	UMBER: //9060017971	
The enclosed State	ement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all ce	orrespondence concerning this matter to	the following:
	Jonal bonl	Ct Person
-	Name of Contac	et Person
	Joral Kyla, Firm/Comp	f.A.  any
-	21704 West like	Hishray
	Minni fl 33 City/State and 2	'
-	E-mail address: (to be used for futu	re annual report notification)
For further inform	ation concerning this matter, please call	:
	-	
J <i>o</i> nal Na	me of Contact Person	at () Area Code & Daytime Telephone Number
	00 check made payable to the Departme	
	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 <u>lawds</u> in order to change its registered office or registered agent, or both, in the State of Florida.
Tool // 1 / A
1. The name of the corporation:
2. The principal office address: 21304 Wet VIDE Mightay
Miari, FC 37180
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/100001} Document number: 1/1900001} ) \( \frac{1}{2} \)
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)
Tond huplan
21305 WEST PILE MILLAY
Miani, FL 33180 55 75 FB
6. The name and street address of the new registered agent (if changed) and /or registered office—  (if changed):    Total Kaplan
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.
Ged legt Tonal leaplan Crosident
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.
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Hrinted Name

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