

P19000081286

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JA Enterprises of Central Florida
Name of Corporation

DOCUMENT NUMBER: P19000081286

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:

Jacob Anzani

Name of Contact Person

JA Enterprises of Central Florida

Firm/Company

881 Barton Boulevard

Address

Rockledge, FL 32955

City/State and Zip Code

jacobanzani@hotmail.com

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

For further information concerning this matter, please call:

Jacob Anzani

Name of Contact Person

at (321) 439-6423

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

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.

- Jacob Anzani
3623 Garrett Drive
Rockledge, FL. 32955

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- Jacob Anzani
- 881 Barton Boulevard
- P.O. Box NOT acceptable
- Rockledge, FL 32955

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.

Jacob Anzani - PTSD

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.

02/08/21
Date

Typed or Printed Name

CR2E045 (04/13)