## P210000 25550

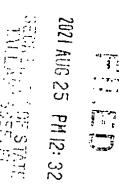
(Requestor's Name)
(Address)
(133.223)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 ming officer.
}

Office Use Only



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08/25/21--01016--005 \*\*35.00



A. Butler 9/10/21

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: JR & B CORPORATION Name of Corporation					
·					
DOCUMENT NUMBER: P21000025550					
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this r	natter to the following:				
JUAN FRUTOS INFANTES					
Name of Contact Person	<del></del>				
JR & B CORPORATION					
Firm/Company					
32 W 42 ST					
Address	<del></del>				
HIALEAH, FL 33012					
City/State and Zip Code	-				
jfrutosinsurance@gmail.com					
E-mail address: (to be used for future annual	report notification)				
For further information concerning this matter, pl	ease call:				
JUAN FRUTOS INFANTES	at ( 786 ) -355-1040 Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the I	Department of State.				
Mailing Address: Amendment Section	Street Address: Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

CR2E045 (04/13)

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

Pursuant to the p statement of char	nge is submitted	for a corpo	ration organi:	ed under the law	es of the State	of Flor	ida	<del></del>
in order	to change its re			ed agent, or both	h, in the State	of Florid	a.	
1. The name of the	he corporation:	JR & B CC	ORPORATION	! . <del></del>	<del>-</del>	<del></del>		
2. The principal of	office address:_	32 W 42 S	T, HIALEAH,	FL 33012		<del></del>		
3. The mailing a	ddress (if differe	ent): <u>N/A</u>						
4. Date of incorporation/qualification: 03/12/2021 Document number: P2100002555							50	
5. The name and		of the current	t registered ag	ent and registere				
	FRUTOS INFA	ANTES, JUZ	\N					
	1283 W 43 PL					77.	2021	
	HIALEAH, FL	. 33012					2021 AUG 2	
6. The name and (if changed):	l street address c	of the new re	egistered agen	t (if changed) and	d /or registere	ed office	25 PM 12: 32	4 J e
	REGISTERED	) AGENT N	AME NOT HA	S CHANGED		<u> </u>	 	1
	32 W 42 ST		· 				32	
			P.O. Box	NOT acceptable				
	HIALEAH, FI	<del>.</del>						
The street addre								agent.
Such change wa authorized by th	is authorized by ne board, or the	resolution corporation	duly adopted has been not	by its board of o	directors or b of the change	y an offic	er so	
	Anital	•		JUAN FRUTO	S INFANTES			
Signatu	ng of an officer of dir	ector	<del></del>	Pani	ied or typed name	and title		
I found have accorded	to comply with a ad I am familiar ing filed merely	the provisio with and a to reflect a	ons of all stati ccept the obli- change in the	l agree to act in tes relative to th gation of my pos registered offic	ie proper and	т сотишь	e perfo 2nt. Oi nfirm t	rmanc r, if thi that the
Who	8/11/2021							
Sig	nature of Registered	Agent			Date		_	
If signing on be	chalf of an entity	y:						
т	yped or Printed Nam	c						

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)