Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future 🗹 annual report mailings. Enter only one email address please.

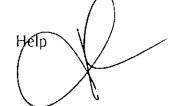
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REGISTERED AGENT CHANGE JM BEARD CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



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

statement of cha	provisions of sections 607,0502, nge is submitted for a corporation of the sections of the section of the sections of the sections of the sections of the section of th	on organized i	ander the laws of the S	tate of Flo	orida	this		
	r to change its registered office (igent, or both, in the Si	tate of Fla	orida.			
	he corporation: JM Beard Corpor				_ -			
2. The principal	office address: 7901 4th St N STE	300 St. Peters	sburg, FL 33702					
3. The mailing a	ddress (if different): 7901 4th St	N STE 300 St	. Petersburg, FL 33702					
	poration/qualification: 02/08/23		Document number: P	23000012	125			
	street address of the current reg tment of State: (If resigned, ente		and registered office of	n file with	1 the			
	REGISTERED AGENTS INC							
	7901 4TH ST N STE 300							
	ST. PETERSBURG, FL 33702	·			2024 APF			
6. The name and (if changed):	street address of the new registe	ered agent (if o	changed) and /or regist	ered offic	APR 26			
	Northwest Registered Agent LLC		ا د د د ا د د د	平				
	7901 4th St N STE 300	AM 11: 58						
	P.O. Box NOT acceptable St. Petersburg FL 33702							
The street addre	ss of its registered office and the identical.	ne street addre	ess of the business off	ice of its	register	red agent,		
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has	adopted by it been notified	ts board of directors o in writing of the char	r by an o	fficer se	0		
ν	O BEALO	JAF	JARRAD BEARD- President					
I hereby accept I further agree t of my duties, an document is bei	e of an officer or director the appointment as registered c o comply with the provisions of d I am familiar with and accept ng filed merely to reflect a char been notified in writing of this	agent and agr fall statutes r t the obligation age in the regi change.	rnide Gripper in ee to act in this capac elative to the proper c in of my position as re istered office address,			rformance Or, if this n that the		
TAN.		04/:	26/2024					
Sign	nature of Registered Agent		Date					
If signing on bel	half of an entity:							
Taylor Newman								
Ty	ped or Printed Name	_						

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