Pa6000096854

(R	Requestor's Name	
A)	Address)	
. (A	Address)	
(C	City/State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(E	Business Entity Na	ame)
(C	Oocument Numbe	r)
Certified Copies	Certificate	es of Status
Special Instructions t	o Filing Officer:	

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: JORGEHANE LABORATORIES CORP.

Name of Corporation

P96000096854

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:

Michael B. Chesal

Name of Contact Person

PERETZ CHESAL & HERRMANN, P.L.

Firm/Company

2 SOUTH BISCAYNE BLVD. SUITE 3700

Address

MIAMI, FL 33131

City/State and Zip Code

Mchesal@pch-iplaw.com

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

For further information concerning this matter, please call:

Michael B. Chesal

_,305

341-3000

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

•	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
	ge is submitted for a corporation organized under the laws of the State of <u>Florid &</u> to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	corporation: JORGEHANE LABORATORIES CORP.
2. The principal of	ffice address: 187 BAL CROSS DRIVE
	30UR, FL 33154
3. The mailing add	lress (if different):
4. Date of incorpo	ration/qualification: // /22//556 Document number: P96000096854
5. The name and s	treet address of the current registered agent and registered office on file with the nent of State: (If resigned, enter resigned)
<u>.</u> F	PERETZ CHESAL & HERRMANN, P.L.
_2	201 S. BISCAYNE BLVD. SUITE 1750
7	ЛІАМІ, FL 33131 6 Д
(if changed):	treet address of the new registered agent (if changed) and /or registered office
F	PERETZ CHESAL & HERRMANN, P.L.
// > 2	SOUTH BISCAYNE BLVD. SUITE 3700
	P.O. Box NOT acceptable
/ // -	MAMI, FL 33131
The street address as changed will be	of its registered office and the street address of the business office of its registered agent, identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
	Jorge Hane DPS If an officer or director Jorge Hane Printed or typed name and title
The second	annowate as registered agent and agree to get in this capacity
I further agrée to o performance of m	e appointment as registered ugent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I the corporation has been notified in writing of this change.
agent, Or, if this of hereby confirm the	
	MWHI, NG MENSON 8/5/20/3 ure of Registered Agent Date
If signing on behal	<u></u>
_ _	d of Herrium, f.C.
Types	
	* * * 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 (03/12)