P97000031276

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MALLANASSEE FLORING

C.COULLIETTE

JUL 09 2010

EXAMINER

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Jack and Jill International, Inc. Name of Corporation							
DOCUMENT NUMBER:_	DCUMENT NUMBER: P97000031276						
The enclosed Statement of C	Change of Registered Office	e/Agent and fee	are submitted fo	or filing.			
Please return all corresponde				C			
r toubo rotain an oottooponat	moe concerning time manus		.6.				
	Mia A. T	homas					
Name of Contact Person							
	Jack and Jill International, Inc.						
	Firm/Co	mpany					
	1400 W. Fairbanks	Avenue, Sui	te 202				
	Addı	ress					
	•		,				
	Winter Park	FL 32789	•				
City/State and Zip Code							
mthomas@miathomascpa.com E-mail address: (to be used for future annual report notification)							
L-man a	idaless. (to be used for it	mure ammuai iv	eport notificatio	41 <i>)</i>			
For further information conc	erning this matter, please of	all:					
Mia Δ	Thomas	407	. 5	38_6048			
Name of Cor		Area Coo	de & Daytime Te	38-6048 lephone Number			
Enclosed is a \$35.00 check r	nade payable to the Depart	ment of State.					
Mai	iling Address:		et Address:				
	endment Section		ndment Section				
	ision of Corporations		sion of Corpora	tions			
	. Box 6327		on Building				
Tall	lahassee, FL 32314		Executive Cen				
·		Talla	ahassee, FL 323	01			

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida nge is submitted for a corporation organized under the laws of the State of r to change its registered office or registered agent, or both, in the State of	Florida		
1. The name of t	he corporation: Jack and Jill International, Inc.			
2. The principal Orlando, F	office address: 14588 Braddock Oak Drive L 32837			
	ddress (if different): P.O.Box 421677			
	ee, FL 34742-1677			
4. Date of incorp	oration/qualification: 04/07/1997 Document number:	P97000)3127	6
	street address of the current registered agent and registered office on file w tment of State: (If resigned, enter resigned)	vith the		
	Thomas, Maria A.			
	420 S. Orange Avenue, Suite 500		siat	
	Orlando, FL 32801			**\$ <u>~</u> *
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered o	MASSELES.	- 00 AM	
	Mia A. Thomas		Ö	
	1400 W. Fairbanks Avenue, Suite 202	Alie Riba	42 Ø)	
	Winter Park, FL 32789			
The street addre	ss of its registered office and the street address of the business office of be identical.	its registe	ered ag	ent,
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by a be board, or the corporation has been notified in writing of the change.	n officer	so	
Signature of an officer or director Alex Nunes, President Printed or typed name and title				
I hereby accept I further agree to of my duties, an document is beil corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and co d I am familiar with and accept the obligation of my position as register ng filed merely to reflect a change in the registered office address, I her been notified in writing of this change.	mplete p red agent eby confi	erform Or, ij rm thai	ance f this t the
Sig	10 A Ams S/26/10 Sature of Registered Agent Date			
	half of an entity:			
	Mia A. Thomas /ped or Printed Name			

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