(Re	questor's Name)	
•	,	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: TWO JS Signs Inc. Name of Corporation
DOCUMENT NUMBER: P97 0000 55 985
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:
Carrie Johnston Name of Contact Person
Name of Contact Person
Two Js Signs Inc.
24917 Hunt Lane
Summer land Key FC 33042-City/State and Zip Code
E-mail address: (To be used for future annual report notification)
For further information concerning this matter, please call: Carrie Tohnston at (850, 528 - 5509) Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State

inclosed 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

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.	
1. The name of the corporation: Two Js Signs, Inc.	
2. The principal office address: 24917 Hunt lane	
Summer land Key Fr 33042	
3. The mailing address (if different): 5 a yrul	
4. Date of incorporation/qualification: 6/25/1997 Document number: P97 0000 5598.	5
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Brent Yawn	r,
3955 Garcia Drive	
Tallahassee FL 32309	ZIE.
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	Q ;
Edward Johnston	۴.
24917 Hunt lane	
P.O. Box NOT acceptable	
Summerland Key Fix 33042	
The street address of its registered office and the street address of the business office of its registered agen as changed will be identical.	t,
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.	
Signature of an officer or prector Carrie Johnston Prec	ident
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 performant of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if the 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.	
Signature of Reptstered Agent	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Typed or Printed Name	

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