

S65108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

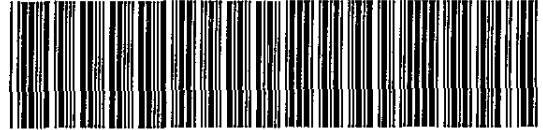
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

7/25  
2:35  
Spoke with Angela  
Sensen - have  
authorization to complete  
sections 1-4 on  
change form R.A.

Office Use Only



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07/21/03--01057--019 \*\*35.00

FILED

03 JUL 21 PM 2:49

CLERK OF STATE  
TALLAHASSEE, FLORIDA

R.A. chg  
MAD TJS

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** JENSEN FINANCIAL SERVICES, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** S65108

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Angela T. Jensen

(Name of Person)

(Name of Firm/Company)

5704 Mulberry Drive

(Address)

Tamarac, FL 33319

(City/State and Zip Code)

For further information concerning this matter, please call:

Angela Jensen

(Name of Person)

at ( 954 ) 614-4217

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

## 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: JENSEN FINANCIAL SERVICES, INC.
2. The principal office address: 999 ROCK ISLAND ROAD  
NORTH LAUDERDALE, FL 33068
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 07/05/1991 Document number: S65108
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Angela T. Jensen


999 Rock Island Road

North Lauderdale, FL 33068

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
Christopher L. Jensen  
999 Rock Island Road  
(P.O. Box or personal mailbox NOT acceptable)  
North Lauderdale, FL 33068

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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, chairman or vice chairman of the board)

Christopher L. Jensen, Pres/Secy/Treas  
(Printed or typed name and title)

*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 performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this 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 Registered Agent)

07/16/03

(Date)

If signing on behalf of an entity:

Jensen Financial Services, Inc.

(Typed or Printed Name)

Pres/Secy/Treas

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314