

767440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 DEC 20 PM 1:02

APPROVED
AND
FILED

C. LEWIS
DEC 31 2013
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Change of Address of Registered Agent
Name of Corporation

DOCUMENT NUMBER: 767440

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:

Robert Baumiller

Name of Contact Person

CVE Master Management Company Inc

Firm/Company

3501 West Drive

Address

Deerfield Beach, Florida 33442-2085

City/State and Zip Code

bbaumiller@cvedb.com

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

For further information concerning this matter, please call:

Robert Baumiller

Name of Contact Person

at (**954**) **421-5566**

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

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: CVE Master Management Company, Inc.

2. The principal office address: 3501 West Drive, Deerfield Beach, Florida 33442-2085

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 04/27/1984 Document number: 767440

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)

Patrick J. Murphy & Associates PA
272 Hillsboro Blvd.
Deerfield Beach, Florida 33442-2085

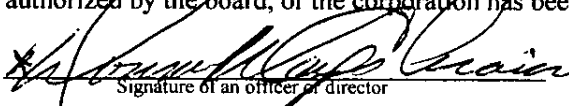
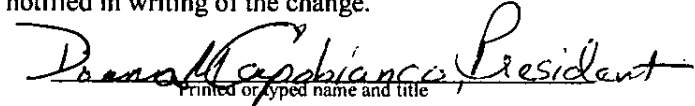
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Patrick J. Murphy & Associates PA
650 East Hillsboro Blvd. Ste 101
P.O. Box NOT acceptable
Deerfield Beach, Florida 33441

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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 or director 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

12/13/13
Date

If signing on behalf of an entity:

Bill Murphy
Typed or Printed Name

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