G09688

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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25 JUN -9 AN ID: 44

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJ: Name	ECT: Mardale Specialties Direct Inc of Corporation			
DOCU	JMENT NUMBER: G09688			
The er	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.		
Please	return all correspondence concerning this	s matter to the following:		
Adrien	ne Rolla			
Name	of Contact Person			
Ronayı	ne Hackeling Rolla			
Firm/C	Company			
441 Sa	w Mill River Road			
Addre	SS			
Yonke	rs. NY 10701			
City/S	tate and Zip Code			
	arolla@optonline.net			
E-mai	il address: (to be used for future annua	l report notification)		
For fu	rther information concerning this matter.	please call:		
Adrien	ne Rolla	at (914)964-7063 Area Code & Daytime Telephone Number		
	Name of Contact Person	Area Code & Daytime Telephone Number		
Enclos	sed is a \$35.00 check made payable to the	Department of State.		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Tallahassee, FL 32314			

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 6 inge is submitted for a corporation ir to change its registered office or	ı organized und	der the laws of the State	of Florida		
1. The name of t	the corporation: Mardale Specialtie	es Direct Inc.				
	office address: 4113 NW 124th Av					
3. The mailing a	address (if different): same		<u></u>			
4. Date of incorp	poration/qualification: 11-19-1982	U	ocument number: G096	88		
	d street address of the current regis ntment of State: (If resigned, enter		d registered office on file	e with the		
	Mary Dion					
4101 NW 124th Avenue						
	Coral Springs, FL 33065					
6. The name and (if changed):	d street address of the new register	red agent (if ch	anged) and /or registered			
	Eduardo Merino			# -9 # #		
	4113 NW 124th Avenue			***		
		P.O. Box NOT acc	ceptable	[
	Coral Springs, FL 33065			음을 £		
The street addr as changed will	ess of its registered office and the be identical.	e street address	s of the business office	of its registered agent,		
Such change wanthorized by	as authorized by resolution duly a he-board, or the corporation has b	adopted by its been notified in	board of directors or by a writing of the change.	an officer so		
AC		Adrienne Rolla, Secretary				
5	ire of an officer of director		Printed or typed name i	and title		
I further agree of my duties, ar document is be	the appointment as registered a to comply with the provisions of all am familiar with and accept ing filed merely to reflect a chang s feen notified in writing of this c	all statutes rel the obligation ge in the regis	ative to the proper and of my position as regist	terea agent. Or. 11 inis		
8/h	//	06.02	2.25			
	gnature of Registered Agent		Date			
If signing on be	chalf of an entity:					
Eduardo Merino		_				
'1	lyped or Printed Name					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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