

P98000017367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

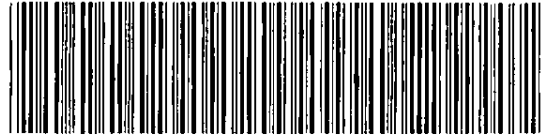
(Business Entity Name)

(Document Number)

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S. CHATHAM
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MASK Enterprises, Inc.
Name of Corporation

DOCUMENT NUMBER: P98000017367

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:

Sharon Krug
Name of Contact Person

MASK Enterprises, Inc.
Firm/Company

18903 Summersong Dr.
Address

Hudson FL 34667
City/State and Zip Code

maskmoneyfast@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon Krug at (904) 716-6775
Name of Contact Person 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: MASK Enterprises, Inc.
- 2. The principal office address: 18903 Summersong Dr
Hudson FL 34667
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 02/12/1998 Document number: P98000017367
- 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)

Charles E. Hall, Jr.
3791 A1A South, Suite B
Saint Augustine FL 32080

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

Mark Krug
18903 Summersong Dr
P.O. Box NOT acceptable
Hudson FL 34667

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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.

Mark Krug
Signature of an officer or director

Sharon Krug, Vice President
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.

Mark Krug
Signature of Registered Agent

7-5-2023
Date

If signing on behalf of an entity:
Mark Krug
Typed or Printed Name

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