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COVER LETTER

TO: Ame

Amendment Section Division of Corporations

SUBJECT: MG MARBLE & GRANITE DESIGNERS INC

Name of Corporation

DOCUMENT NUMBER: P12000095842

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:

MICHAEL S. FELDMAN

Name of Contact Person

WASSERSTEIN, P.A.

Firm/Company

301 YAMATO ROAD, SUITE 2199

Address

BOCA RATON, FL 33431

City/State and Zip Code

michaelf@wassersteinpa.com

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

For further information concerning this matter, please call:

MICHAEL S. FELDMAN

, 561 \ 288-3999

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

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statement of ch	nange is submitted for a corporati	or registered agent, or both, in the State of FLORIDA.	
1. The name of	f the corporation: MG MARBL	LE & GRANITE DESIGNERS INC	
		RGIA STREET, BAY 5, DELRAY BEACH, FL 33	3444
3. The mailing	address (if different): N/A		
4. Date of inco	prporation/qualification: 11/19/	2012 Document number: P12000095842	
	nd street address of the current repartment of State: (If resigned, enter	gistered agent and registered office on file with the er resigned)	
	EDNA MACHADO		
	9396 PINION DRIVE	SLL ALL	_
	LAKE WORTH, FL 33	SLUMLIAN 27 ALLAHASS	- F
6. The name as (if changed)		tered agent (if changed) and /or registered office	i Į
	WASSERSTEIN, P.A.		
	301 YAMATO ROAD,		
	BOCA RATON, FL 33	O Box NOT receptable 431	
The street add	lress of its registered office and t	the street address of the business office of its registered agent,	,
Such change v	was authorized by resolution duly the board, or the corporation has	y adopted by its board of directors or by an officer so s been notified in writing of the change.	
- Ama	Asehre	EDUA MACHADO Printed or typed name and bite	
l furthér agrè	e to comply with the provisions to of my duties, and I am familiar w	agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as registered ely to reflect a change in the registered office address, I notified in writing of this change.	
M	(F)//	6/13/22	
	Signandre of Registered Agent	Date	
0 0	behalf of an entity:		
WICHAEL	. S. FELDMAN	_	

Make Checks Payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Cr2E045 (03/12)

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