## I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JASON D MORANO

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# P02000101735

## Entity Name: MASTER NETWORKING & CONSULTING, INC.

#### **Current Principal Place of Business:**

6568 COLUMBIA AVENUE LAKE WORTH. FL 33467

## **Current Mailing Address:**

6568 COLUMBIA AVENUE LAKE WORTH. FL 33467

## FEI Number: 13-4210880

# Name and Address of Current Registered Agent:

MORANO, JASON D 6568 COLUMBIA AVENUE LAKE WORTH, FL 33467 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

## **Officer/Director Detail :**

Title	D	Title	S
Name	MORANO, JASON D	Name	MORANO, DANA ESECRETA
Address	6568 COLUMBIA AVENUE	Address	6568 COLUMBIA AVENUE
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33467

Electronic Signature of Registered Agent

PRESIDENT

Date

01/21/2015

# FILED Jan 21, 2015 Secretary of State CC0207040732

Certificate of Status Desired: No

Date