

2016 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000134854

Entity Name: MAX STORY, P.A.

Current Principal Place of Business:

328 2ND AVENUE NORTH
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

328 2ND AVENUE NORTH
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 20-1668353

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STORY, MAX
328 2ND AVENUE NORTH
JACKSONVILLE BEACH, FL 32250 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: MAX STORY

12/05/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PST
Name STORY, MAX
Address 328 2ND AVENUE NORTH
City-State-Zip: JACKSONVILLE BEACH FL 32250

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: MAX STORY

PRESIDENT

12/05/2016

Electronic Signature of Signing Officer/Director Detail

Date