356562

(Requestor's Name)	
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: MacBrud Corporation

Name of Corporation

356562

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:

Todd Lary

Name of Contact Person

MacBrud Corporation

Firm/Company

12101 SW 131st Ave.

Address

Miami, FL 33186

City/State and Zip Code

toddlary@aol.com

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

For further information concerning this matter, please call:

Todd Lary

₇305

815-1942

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Florida rto change its registered office or registered agent, or both, in the State of Florida.
1 The name of	the corporation: MacBrud Corporation
2. The principal	office address: 12101 SW 131st Ave., Miami, FL 33186
3. The mailing a	address (if different): PO Box 770640, Miami, FL 33177
4. Date of incor	poration/qualification: 12/10/1969 Document number: 356562
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Todd Lary
	14021 SW 143rd Court, Unit 6
	Miami, FL 33186
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	12101 SW 131st Ave. P.O. Box NOT acceptable
	P.O. Box NOT acceptable Miami, FL 33186
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by-th	is authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signatur	Today Printed or typed name and title
I hereby accept I further agree to performance of	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sigl	pature of Registered Agen
	half of an entity:
Ту	ped or Printed Name

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 * * *