F0300001739

(Requestor's Name)				
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	· #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Amendment Section **Division of Corporations** Marvin Hewatt Enterprises, Inc. SUBJECT:_ Name of Corporation F03000001739 DOCUMENT NUMBER: 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: Penny Boynton Name of Contact Person MAJORS Management, LLC Firm/Company PO Box 1565 Address Lawrenceville GA 30046 City/State and Zip Code penny@majorsmgmt.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Penny Boynton Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State.

Street Address:

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address:

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

CR2E045 (8/05)

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May 11, 2010

PENNY BOYNTON MAJORS MANAGEMENT, LLC P. O. BOX 1565 LAWRENCEVILLE, GA 30046

SUBJECT: MARVIN HEWITT ENTERPRISES, INC.

Ref. Number: F03000001739

We have received your document for MARVIN HEWITT ENTERPRISES, INC. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file your document is \$35.

There is a balance of \$10.00 due to file the Statement of Change.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 410A00011840



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

statement of cha	provisions of sections 607.0502, 617.050 ange is submitted for a corporation organ er to change its registered office or regist	nized under the laws of the State	of Georgia
	the corporation: Marvin Hewatt E office address: 760 Briscoe Blvd, La		
3. The mailing a	address (if different): PO Box 1565, L	.awrenceville, GA 30046	
4. Date of incorp	poration/qualification: 4/8/2003	Document number:	F03000001739
	d street address of the current registered a rtment of State: (If resigned, enter resigned	•	le with the
	CT Corporation Systems		
	1200 South Pine Island Road		THE RECENTAGES
	Plantation, FL 33324		EFE A TO
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registere	d office Tag U
	Robert W. Russell		1: 05 STATE ELORIDA
	1136 Beck Avenue		
	P.O. Box NO Panama City, FL 32401	OT acceptable	
The street address changed will	ess of its registered office and the street	address of the business office	of its registered agent,
Such change wanthorized by t	ras authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or bottlifted in writing of the change	oy an officer so e.
Signatu	Mate an Oliver or director	Scott A. Moon,	Secretary
I further agree of my duties, ar document is be	t the appointment as registered agent an to comply with the provisions of all sta nd I am familiar with and accept the ob ing filed merely to reflect a change in to is been notified in writing of this change	tules relative to the proper and ligation of my position as regi he registered office address. I	y d complete performance stered agent. Or, if this hereby confirm that the
Osh	Author	4/30/20	110
	gnature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
1	Typed or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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