F11000000913

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DIVISION OF CORPORATIONS

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RA ROMS

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 nge is submitted for a corporation organized under the laws of the State of DELAWARE to change its registered office or registered agent, or both, in the State of Florida.
	he corporation: MCRS INVESTMENTS INTERNATIONAL, INC.
2. The principal	office address: 401 E. LAS OLAS BOULEVARD, SUITE 1650
	FORT LAUDERDALE FL 33301
3. The mailing a	ddress (if different): 300 Crown Colony Drive Suite 203
4. Date of incorp	poration/qualification: 03/02/2011 Document number: F1100000913
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	CORPORATE CREATIONS NETWORK INC.
	11380 PROPERTY FARMS ROAD #221E
	PALM BEACH GARDENS FL 33410
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	REGISTERED AGENT SOLUTIONS, INC.
	155 Office Plaza Dr. Suite A
	P.O. Box NOT acceptable
	Tallahassee, FL 32301
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
- Lando Signatur	Chlis Music Printed or typed name and title
I hereby accept I further agree to of my duties, and document is bein corporation has	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 performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change. 0
d t	nature of Registered Agent Date
If signing on bel	half of an entity:
	pres, Asst. Secretary ped or Printed Name
	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314