Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for fulture annual report mailings. Enter only one email address please.

REGISTERED AGENT CHANGE MENEMSHA DEVELOPMENT GROUP, INC.

Certificate of Status	0
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COVER LETTER

10:	Amendment Section Division of Corporations
CUDI	MENEMSHA DEVELOPMENT GROUP, INC.
SUBJ	Name of Corporation
DOC	F13000000195 UMENT NUMBER:
The ca	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Kim Swenson
	Name of Contact Person
	Menemsha Development Group
	Firm/Company
	20521 Earl St.
	Address
	Torrance, CA 90503
	City/State and Zip Code
	kswenson@menemshasolutions.com
	E-mail address: (to be used for future annual report notification)
For fu	orther information concerning this matter, please call:
	Name of Contact Person Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations Clifton Building
	Tallahassee El 20214 2661 Evecutive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

	·	14	AUG	12	AH	6 : 53
STATEM	ENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT O BOTH FOR CORPORATIONS		FE j		, (1)	
statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, ar 617.1508, Florida Statutes, th unge is submitted for a corporation organized under the laws of the State of California or to change its registered office or registered agent, or both, in the State of Florida.	is	Alle:	SSEE		II.DA
i. The name of	the corporation: MENEMSHA DEVELOPMENT GROUP, INC.					;
2. The principal	office address: 20521 Earl Street Turrance, CA 90503			_		:
	di e vi vi e			_		•
3. The mailing a	address (if different):			_		
4. Date of incor	poration/qualification: 01/14/2013 Document number: F13000000195			, 		
	d street address of the current registered agent and registered office on file with the runent of State: (If resigned, enter-resigned)					
	SUPERBIZ REGISTERED AGENT, INC.					1
	2761 VISTA PARKWAY SUITE 4					; ;
	WEST PALM BEACH, FL 33411					;
6. The name and (if changed):	d street address of the new registered agent (If changed) and /or registered office					
	c/o C T Corporation System, 1200 South Pino Island Road					
	P.O. Box NOT acceptible					•
The street address changed will	ess of its registered office and the atreet address of the business office of its registered be identical.	i ager	nt.			
	es authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.					į
// Signati	The Vines of Citation and Italian	土				
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my dulles, and I am familiar with and accept the obligation of my position as registe is document is being filed merely to reflect a change in the registered office address, that the corporation has been notified in writing of this change.	red I				•
	Properties System 8/11/14 United States					
If signing on be	half of an entity: Nicole Chouinard Assistant Secretary					:
т	yped or Printed Name					:
	* * * FILING FEE: \$35.00 * * * MAKE CHECKS PAYABLE TO FLORIUM DEPARTMENT OF STATE					
M CR2E045 (03/12)	AIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314					
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