F14000001330

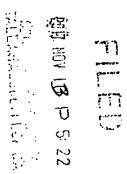
(Re	questor's Name)		
(Address)			
(Address)			
(Cit	y/State/Zip/Phone r	// /	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates o	of Status	
Special Instructions to Filing Officer:			

Office Use Only



100304769891

10/25/17--01003--002 **35.00



1:0V 1 5 2017

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MPS Plastic Wall Products, Inc.

Name of Corporation

DOCUMENT NUMBER: F14000004230

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:

Derek Matthews

Name of Contact Person

MPS Plastic Wall Products, Inc.

Firm/Company

22611 Markey Ct. #109

Address

Sterling, VA 20166

City/State and Zip Code

derek@millerpaneling.com

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

For further information concerning this matter, please call:

Derek Matthews

.,703 (944-0369

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



October 27, 2017

DEREK MATTHEWS 22611 MARKEY CT #109 STERLING, VA 20166

SUBJECT: MPS PLASTIC WALL PRODUCTS, INC.

Ref. Number: F14000004230

We have received your document for MPS PLASTIC WALL PRODUCTS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6050.

Letter Number: 817A00021801

Tracy L Lemieux Regulatory Specialist II

RECEIVED

NOVIS BALGSI

FISION ATCAMENS
ALLA

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

statement of chang	ge is submitted for a corporation organiz	2, 607.1508, or 617.1508, Florida Statutes, this zed under the laws of the State of <mark>Nevada</mark> red agent, or both, in the State of Florida.	
1. The name of the	e corporation: MPS Plastic Wall I	Products, Inc.	
2. The principal of	flice address: 22611 Markey Ct.	#109, Sterling, VA 20166	
3. The mailing add	dress (if different):		
4. Date of incorpo	ration/qualification: 6/17/08	Document number: C20170313-0423	
	treet address of the current registered agnent of State: (If resigned, enter resigned	cent and registered office on file with the	
1	MPS Plastic Wall Products, I	nc.	
1	13650 Fiddlesticks Blvd #202-312		
_ F	Fort Myers, FL 33912		
6. The name and s (if changed):	treet address of the new registered agent	a. Timothy Hant	
	5583 Lee Street, Suite #2	AG. Timothy Hint T	
	P.O. Box NOTa	icceptable C. C.	
<u> </u>	ehigh Acres, FL 33971	<u> </u>	
The street address as changed will be	s of its registered office and the street a e identical.	ddress of the business office of its registered agent,	
Such change was authorized by the	authorized by resolution duly adopted l	by its board of directors or by an officer so fied in writing of the change.	
/ /	of a second	David Miller, President	
I hereby accept the I further agree to performance of magent. Or, if this	of an officer of director te appointment as registered agent and comply with the provisions of all statut y duties, and I am familiar with and ac- document is being filed merely to reflec at the corporation has been notified in	tes relative to the proper and complete cept the obligation of my position as registered ct a change in the registered office address. I	
12/18		10/5/17	
$\overline{}$	ure of Registered Agent	Date	
If signing on beha	ilf of an entity:		
Tim Hunt	ed or Printed Name		

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

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