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(((H17000285852 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Fax Number 🕝

: (702)866-2500

: (702)866-2689

\*\*Enter the email address for this business entity to be used for future; annual report mailings. Enter only one email address please.\*\*

Email Address:

## REGISTERED AGENT CHANGE MWRESOURCE, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

OCT 3 1 2017

S. YOUNG

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations					
SUBJ	ECT:	MWResource Name of Co	a, Inc.			
		Name of Co	a peration			
DOCT	JMENT NUMBER:	F140	000004491			
The er	closed Statement of Change of R	egistered Office	Agent and fee are submitted for filing.			
Please	return all correspondence concer	ning this matter	to the following:			
		Lindsey D				
	<del></del>	Name of Con	tret Person			
		InCorp Sen	vices, inc.			
		Firm/Co	mpany			
	3773 H	oward Hughes	Pkwy. · Sulte 500S			
	<del></del>	Addr	CSS			
		Las Vegas, NV	/ 89169-6014			
	City/State and Zip Code					
		documents@i	Incom.com			
	E-mail address: (to	be used for fu	iture annual report notification)			
For fu	rther information concerning this	matter, please c	all:			
Lir	ndsey Dane on behalf of InCor	n Services Inc	. at ( 707 ) BBB 7500			
	Name of Contact Person	)	at ( <u>702</u> ) <u>888-2500</u> Area Code & Daytime Telephone N	Vumber		
	sed is a \$35.00 check made psyab					
	Malling Addre Amendment S	<del>56:</del>	Street Address:			
			Street Address: Amendment Section			
	Division of Co P.O. Box 632		Division of Corporations Clifton Building			
	Tallahassee, F		2661 Executive Center Circle	2		

CR2E045 (03/12)

Tallahassee, FL 32301

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

statement of cha	nge is submitted	for a corporation (	organized i	7.1508, or 617.1508, inder the laws of the l agent, or both, in the l	State of NE	evada		
1. The name of t		MWResource, I	_	ζ,	•			
2. The principal	-	600 Righters Fe	my Road	Suite 423			·	
		Bala Cynwyd, P	A 19004					
3. The mailing a	ddress (if differe	nt):						
4. Date of incorp	oration/qualifies	tion: 10/20/	2014	Document number:	F1400	0004491		
		the current register fresigned, enter re		and registered office of	on file with the			
		BUTLER,	NATHAN	AEL				
		4846 Mirame	r Drive, A	pt 1328				
		St Peterst	ourg, FL 3	3708			当	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered off		stered office	MINS	DCT 3(	四二		
		InCorp :	Services, Ir	ж.		100 M	<i>→</i>	
		17888 67	th Court N	lorth	-	Taga OV	£ 9:	حننه
			NOT accepts		<del> </del>		S	
	<del></del> -	Loxehatch	nee, FL 3:	3470		>	თ	
The street address as changed will be	ss of its register be identical.	ed office and the s	treet addre	ss of the business off	ice of its regis	tered agent,		
Such change was authorized by the	s authorized by a e board, or the o	resolution duly ad- orporation has bee	opted by it in notified	s board of directors of in writing of the char	r by an officer nge.	80		
	med laufe	lett	Nal	hanael Curtis Butle	•			
		<del>_•</del>	nt and agre statutes re and accept preflect a c led in writ	Printed or typed to the to act in this capac clative to the proper of the obligation of my change in the register ing of this change.		gistered ess, I		
Middle	among Registered A			October 2		<u>_</u>		
If signing on beh	of an entity:							
Lindsey D	) ane <sub>on behal</sub>	of InCorp Servi	ces, Inc.					
Тур	ped or Printed Name							
•			FEE: \$3					
MA CR2E045 (03/12)	Make ch il to: Division	ECKS PAYABLE TO OF CORPORATION	FLORIDA I S, P.O. Bo	DEPARTMENT OF STA X 6327, TALLAHASSE	TE EE, FL 32314			

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