Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850)521-0821 : (850)558-1515 Fax Number

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 **M&T SECURITIES, INC.**

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Page Count	02
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Corporate Filing Menu

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

statement of chi	ange is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of New York ered agent, or both; in the State of Florida.		
i. The name of	the corporation: M&T SECURITIES,	INC.		
2. The principal	l office address:	14202		
4. Date of incor	poration/qualification: 04/01/1994	Document number: _ [94000001,672		
	d street address of the current registered a rument of State;	gent and registered office on file with the		
	CT Corporation System			
	1200 S. Pine Island Road			9
	Plantation, FL 33324	All results in the second second development to the second	12	VIS
6. The name on (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office .	12 JUN 27	DIVISION OF CORPORATIONS
	Corporation Service Company		7	ORP
	1201 Hays Street			027
)	კ. 23	=
	Tallahassee, FL 32301			3
The street addr as changed wil	ress of its registered office and the street	address of the business office of its registered	. agent,	ı
Such change wanthorized by	vas authorized by resolution duly adopted the board, or the corporation has been no	d by its board of directors or by an officer so tiffied in writing of the change.		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	reroa lastall	Maureen Cathell, Vice President		
. ,	Dire of an officer or director)	(Printed or typed name and title)		
corporation na	I the appointment as registered agent an to comply with the provisions of all stated and accept the obline in a familiar with and accept the obline filed merely to reflect a change in this been notified in writing of this change ion Scrvide Company	id agree to act in this capacity, notes relative to the proper and complete perfo ligation of my position as registered agent. Or the registered office address, I hereby confirm t	rmanc r. if thi hát the	e s
By: Elect	111	06/21/2012		
7 (5	ignathie of Registered Agenty	(Date)		
If signing on b	ehalf of an entity:			
Elizabeth A.	Dawson, Asst. Vice President			
:	(Typed of Printed Name)	''''		

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