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To:

Division of Corporations

Fax Number : (85

: (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

\*\*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.C. DEAN, INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: M.C. DEAN, INC. Name of Corporation
DOCUMENT NUMBER: F9700001768
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:
Mary Castillo
Name of Contact Person
Registered Agent Solutions, Inc.
Firm/Company
Corporate Center One, 5301 Southwest Pkwy, Ste 400
Address
Austin, Texas 78735
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mary Castillo  Name of Contact Person  at (888 ) 705-7274  Area Code & Daytime Telephone Num
Name of Contact Person Area Code & Daytime Telephone Num
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** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.02 ange is submitted for a corpo	ration organize	d under the la	ws of the State o	of Virginia
	er to change its registered off		d agent, or bo	th, in the State o	of Florida.
	the corporation: M.C. DEA				
• •	office address: 1765 GRI	EENSBOR	O STATIO	N PLACE	
TYSON'S	S, VA 22102				
3. The mailing a	address (if different):			<del></del>	
4. Date of incor	poration/qualification: 4/7/	1997	Document	number: <u>F970</u>	100001768
	d street address of the current rtment of State: (If resigned,		nt and register	ed office on file	with the
	C T Corporation	System			
	1200 South Pine Islan	d Road			 ~`
	Plantation	· · · · · · ·	FL	33324	DZN DI
5. The name and (if changed):	d street address of the new re	- <del>-</del>	_	d /or registered	2024 DEC -4 AM SECRE MESSE ELT TALLAHASSE ELT
	Registered Agent	Solutions	, Inc.		
	2894 Remington (	Green Ln.	Ste. A		7: 53
	Tallahassee	P.O. Box No	OT acceptable 3230	8	
The street address changed will	ess of its registered office an be identical.	d the street add	dress of the bu	usiness office of	its registered agent,
-	as authorized by resolution che board, or the corporation				
s/ Doug	Cumins		Doug Cui	mins	Secretary
•	re of an officer or director			ted or typed name an	d title
Jurther agrec If my duties, an locument is bei	the appointment as register to comply with the provision ad I am familiar with and acc ing filed merely to reflect a c s been notified in writing of i	is of all statute. cept the obliga hange in the r	gree to act in s relative to th tion of my pos egistered offic	this capacity, he proper and c sition as registe re address, I her	omplete performance red agent. Or, if this reby confirm that the
Щ	معرب كال		12/04/202	4	
Sig	mature of Registered Agent			Date	
f signing on be	chalf of an entity;				
Mackenzie Hible	er, Assistant Secretary				
Γ	yped or Printed Name	<del></del>			
	* * * [	FILING FEE:	\$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)