

F98000006473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

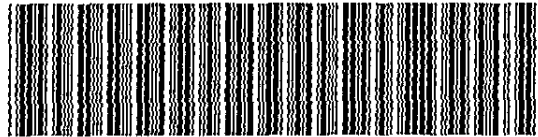
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Gary Lopez GAVE
AUTHORIZATION BY PHONE TO
CORRECT Name, Inc. date + 20. of
DATE 6/17/03 2/A
DOC. EXAM. [Signature]

Office Use Only



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07/14/03--01066--001 **35.00

03 JUL 14 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2/A change
7/16/03

[Signature]

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MDQ, INC.
(Name of corporation)

DOCUMENT NUMBER: _____

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:

GARY J. LOPES
(Name of person)

MDQ, INC.
(Name of firm/company)

211 Hwy. 17 NORTH
(Address)

NORTH MYRTLE BEACH SC 29582
(City/state and zip code)

For further information concerning this matter, please call:

GARY J. LOPES at (888) 249-9646
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of SOUTH CAROLINA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Challenge USA, Inc.
2. The principal office address: 211 Hwy. 17 NORTH
NORTH MYRTLE BEACH, SC 29582
3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 11/25/98 Document number: F98000006473

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ANDREW WERNER
4601 CASON COVE DR. #228
ORLANDO FL 32811

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

KATHLEEN MACIEJEWSKI
316 EAGLE RIDGE DR.
(P.O. Box or personal mailbox NOT acceptable)
DAVENPORT FL 33837

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer, chairman or vice chairman of the board)

GARY J. LOPES PRESIDENT
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

7/1/03
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

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

FILED
03 JUL 14 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA