

F99000003106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 14 2016

C. CARROTHERS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CENTRAL MARKETING SERVICES INC  
Name of Corporation

**DOCUMENT NUMBER:** F99000003106

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:

CAROL MCMAHON, PRESIDENT

Name of Contact Person

CENTRAL MARKETING SERVICES INC

Firm/Company

30 IRVING PLACE

Address

NEW YORK, NY 10003

City/State and Zip Code

CMcma9@aol.com

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

For further information concerning this matter, please call:

CAROL MCMAHON

Name of Contact Person

at ( 212 ) 260-0070

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

**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 NEW YORK in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: CENTRAL MARKETING SERVICES INC
2. The principal office address: 30 IRVING PLACE  
NEW YORK, NY 10003
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 06/17/1999 Document number: F99000003106

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE, FL 32301

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

CAROL MCMAHON

10712 COUNTY LINE ROAD UNIT 6&7

P.O. Box NOT acceptable

HUDSON, FLORIDA 34667-6220

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.

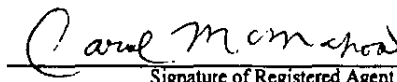


Signature of an officer or director

CAROL MCMAHON, 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 of Registered Agent

FEBRUARY 26, 2016

Date

If signing on behalf of an entity:

CAROL MCMAHON

Typed or Printed Name

**\*\*\* 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 (03/12)

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