

076634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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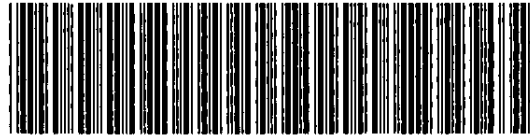
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MFP, Inc  
Name of Corporation

**DOCUMENT NUMBER:** G76634

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:

Julie Gorman  
Name of Contact Person

MFP, Inc  
Firm/Company

628 Bypass Drive  
Address

Clearwater FL 33764  
City/State and Zip Code

JGorman@fcsservices.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Gorman at (727) 324-0410  
Name of Contact 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  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: MFP, Inc
2. The principal office address: 628 Bypass Drive Clearwater FL 33764
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 1983 Document number: G716634

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)

Ernest H Kohlmyer III
South Milhousen Pk Gateway Center
1000 Legion Place Suite 1200
Orlando, FL 32801 US

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

Hepsibeth Nasso
628 Bypass Drive
Clearwater, FL 33764
P.O. Box NOT acceptable

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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.

Tommy Inzina
Signature of an officer or director

Tommy INZINA
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.

Hepsibeth Nasso
Signature of Registered Agent

7/19/12
Date

If signing on behalf of an entity:

Hepsibeth Nasso
Typed or Printed Name

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