

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

Fax Number : (85C) 617-63B0

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCAG00000023

: (850)222-1092 : (850)878-5368

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 MAJESTIC - IDEAL DRY CLEANERS & LAUNDRY, INC.

> Certificate of Status Certified Copy 0 Page Count 03 Estimated Charge \$35.00

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Help

COVER LETTER

	Majestic - ideal dry cleaners & laundry, inc.
EUBJ	Name of Corporation
	H46418
DOC	UMBNT NUMBER:
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
`lease	return all correspondence concerning this matter to the following:
	HENRY MCNATT
	Name of Contact Person
	Firm/Company
	6210 N FLORIDA AVE
	Address
	Firm/Company 6210 N FLACION AVE Address TAMPA, FL 33604
	City/State and zap Code
	B-mail address: (to be used for future annual report notification)
	B-mail address: (to be used for future annual report notification)
	•
or fu	rther information concerning this matter, please call:
	SAME "1 9/3 737-886/
	Name of Contact Person at (9/3) 237 - 886/

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, PL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassoc, FL 32301

CR2B045 (03/12)

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

statement of c	te provisions of sections 607.0507, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of Florida
	der to change its registered office or registered agent, ar both, in the State of Florida.
1. The name o	of the corporation: MAJESTIC - IDEAL DRY CLHANERS & LAUNDRY, INC.
2. The princip	ed office address:
3. The mailing	g address (if different):
4. Date of inco	orporation/qualification: 03/11/1985 Document number: H46418
5. The name a	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)
	Henry McNatt, III
	6210 N Florida Avenue
	Tampa, Plorida 33604
6. The name a (if changed)	and street address of the new registered agent (if changed) and /or registered office): C T Corporation System
•	c/o C T Corporation System, 1200 South Pine Island Road
	P.O. Box NOT acceptable
	Plantation, Florida 33324
-	dress of its registered office and the street address of the business office of its registered agent, ill be identical.
Such change authorized by	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
·	TELLY MENAT AT
i hereby acce I further agre performance agent. Or, if hereby confir	pt the appointment as registered agent and agree to act in this capacity, is to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as registered this document is being filed merely to reliect a change in the registered office address, I that the corporation has been notified in writing of this change.
By:	Thur K. Kney 3/5//5
f	Sharon R. Kresz hard behalf of an entity: Assistant Secretary
	Typod or Printed Name
	* * * FILING PEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (01/12)

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