## P00000016277

(Re	equestor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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08/61/05--01013--021 \*\*:5,00

SECRETARY OF STATE DIVISION OF CORPORATIONS

RA Change 08/03/05

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBI	ECT: MESH CORPORATION
0000	(Name of corporation)
DOC	JMENT NUMBER: P00000016277
The ea	aclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Mabelle Westling
	(Name of contact person)
	•••
	(Firm/Company)
	3951 W University Ave
	(Address)
	Gainesville, FL 32607
	(City/state and zip code)
For fu	rther information concerning this matter, please call:
Mabel	te Westling at ( 352 ) 256-6788
	(Name of contact person) at (352 ) 256-6788 (Area code & daytime telephone number)
Enclos	ed 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

statement of ch	ange is submitted for a corporation org	1502, 607.1508, or 617.1508, Florida Statute $ an 1500$ , anized under the laws of the State of Floridistered agent, or both, in the State of Florida	ia	
1. The name of	the corporation: MESH CORPORATION	ON		
2. The principal	l office address: 2302 NW 71ST Place	, Gainesville, FL 32653		
3. The mailing	address (if different): 3951 W Universit	ly Avenue, Gainesville, FL 32607		
4. Date of incor	poration/qualification: 02/10/2000	Document number: P0000001627	7	_
	d street address of the current registered artment of State:	d agent and registered office on file with the		
	Lilia S. Pocengal			
	2302 NW 71st Place			
	Gainesville, FL 32653			
6. The name and (if changed):		gent (if changed) and /or registered office	SECRETARY DIVISION OF CC	
	Mabelle Westling		NOF A	<u> </u>
	3951 W University Ave	•	- con	E
	(P.O. Box NOT acceptal	ble)	POR	; >
	Gainesville, FL 32607		AM 10: 45	7
The street addr	ess of its registered office and the stre l be identical.	et address of the business office of its regis	stered agent,	•
Such change wauthorized by t	as authorized by resolution duly adop he board, or the corporation has been	ted by its board of directors or by an office notified in writing of the change.	er so	
Male	elle Wettline	Mabelle Westling, President		
	ure of an officer or director)	(Printed or typed name and title)		
I hereby accept I further acree of my duties, ar document is bet corporation has	t the appointment as registered agent of the comply with the provisions of all stand I am familiar with and accept the of the fing filed merely to reflect a change in seen notified in writing of this change.	and agree to act in this capacity, tatutes relative to the proper and complete bligation of my position as registered ager the registered office address, I hereby con ge.	performance nt. Or, if this ıfirm that the	
////	elle Wettleng	July 28th, 2005		
	gnature of Registered Agent)	(Date)	<u>-</u>	
11 signing on be	chalf of an entity:			
	Typed or Printed Name)			

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