

P01000004137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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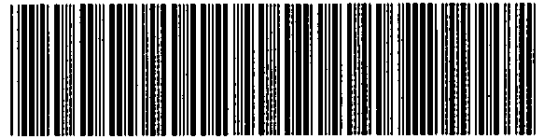
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MTD ENTERTAINMENT CORPORATION
Name of Corporation

DOCUMENT NUMBER: P01000004137

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:

PAULA E. GAJEWSKI
Name of Contact Person

MTD ENTERTAINMENT CORPORATION
Firm/Company

628 Cypress Isles Rd
Address

Osteen FL 32764
City/State and Zip Code

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

For further information concerning this matter, please call:

PAULA E. GAJEWSKI at (407) 493-2940
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: MTD ENTERTAINMENT CORPORATION
2. The principal office address: 628 Cypress Isles Rd
Osteen FL 32764
3. The mailing address (if different): PO BOX 413
OSTEEN FL 32764
4. Date of incorporation/qualification: 01/01/2001 Document number: PO1000004137
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)

PAULA E GATEWSKI

7620 NW 18 ST #206

MARGATE FL 33063

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

PAULA E GATEWSKI

628 Cypress Isles Rd

P.O. Box NOT acceptable

Osteen FL 32764

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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.

Brian M. Gajewski

Signature of an officer or director

BRIAN M. GATEWSKI

Printed or typed name and title

PRESIDENT

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.

Paula E Gajewski

Signature of Registered Agent

12-18-09

Date

If signing on behalf of an entity:

MTD ENTERTAINMENT CORP

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