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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		:
<u> </u>		

Office Use Only



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07/11/11--01029--018 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations Mame of Corporation SUBJECT: PO1000047255 DOCUMENT NUMBER: 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: DAIII PINTRANA
Name of Contact Person MLS EYPRESS Inc 3911 N.E 12 BRIVER HOMESTEDB, FL 33033
City/State and Zip Code F-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person at (786) 859 9733

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: MLD EXPNESS, INC.	_
2. The principal office address: 39/1 N.E /2 DRIVE	_
HONESTEDS, FC 33033	-
3. The mailing address (if different):	_
4. Date of incorporation/qualification: 05/11/2001 Document number: P010000 47 255	- <u>-</u>
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)	
MUSA ALICIA K	
24821 A SOUTH DIXIE HWY	
HOMESTEAR, F.C 33032	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
MANCI PINTROND	- 1
3911 N. E 12 DRIVE P.O Box NOT acceptable	
P.O Box NOT acceptable HOMESTEAR F.C 33033	
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 ordirector 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.	
6-28-11	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
MANLI PINTRANLO Typed or Printed Name	

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