

PO1000116302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

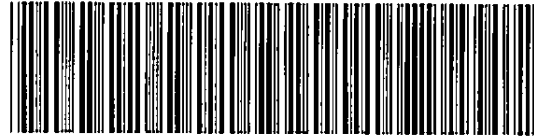
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Macg  
OCT 20 2017

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Musca Consulting, Inc.

Name of Corporation

DOCUMENT NUMBER: P01000116302

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:

Anthony J. Musca

Name of Contact Person

Musca Consulting, Inc.

Firm/Company

4700 Rockside Road - #603

Address

Independence, OH 44131

City/State and Zip Code

tony@muscaproperties.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony J. Musca

Name of Contact Person

at ( 216 ) 642-9500

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: Musca Consulting, Inc.
2. The principal office address: 584 Parkwood Lane, Naples, FL 34103
3. The mailing address (if different): 4700 Rockside Road - #603, Independence, OH 44131
4. Date of incorporation/qualification: 12/07/2001 Document number: P01000116302
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)

AJS Realty Group

2950 Immokalee Road - Suite #2

Naples, FL 34110

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

AJS Realty Group

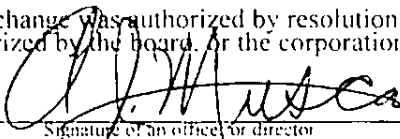
4980 Tamiami Trail, N. - #201

P.O. Box NOT acceptable

Naples, FL 34103

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 or director

Anthony J. Musca, President

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.*

  
\_\_\_\_\_  
Signature of Registered Agent

10/18/11  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Andrew J. Saluan

Typed or Printed Name

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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