

PO2 0000009873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

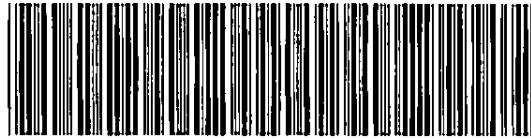
(Business Entity Name)

(Document Number)

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2020 NOV -2 PM 12:36  
SECRETARY OF STATE  
TALLAHASSEE, FL

12/14/20

*[Handwritten signature]*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: Media Works 4U, Inc.  
Name of Corporation

DOCUMENT NUMBER: P0200000 9873

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:

Peter Goodgold  
Name of Contact Person

Media Works 4U, Inc.  
Firm/Company

150 ROYCOURT CIRCLE  
Address

ROYAL PALM BEACH, FL 33411  
City/State and Zip Code

peter@waterworks4u.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter Goodgold at ( 561 ) 213-0114  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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.

**FILED**

2020 NOV -2 PH 12:36

SECRETARY OF STATE  
TALLAHASSEE, FL

1. The name of the corporation: Media Works 4U, Inc.
2. The principal office address: 150 ROY COURT CIRCLE  
ROYAL PALM BEACH, FL 33411
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 1/22/2002 Document number: P02000009873
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)

Peter Goodgold  
150 ROY COURT CIRCLE  
ROYAL PALM BEACH, FL 33411

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

Dustin Goodgold  
2602 SE CALUSA AVE  
P.O. Box NOT acceptable  
PORT ST LUCIE, FL 34952

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.

Peter Goodgold  
Signature of an officer or director

Peter Goodgold PSTD  
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.

Goodgold  
Signature of Registered Agent

10/27/2020  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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  
CR216045 (04/13)