

P02000019255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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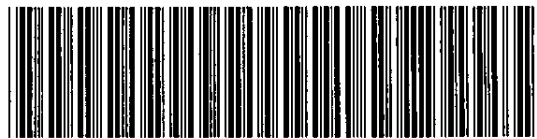
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: MARKET TRADERS INSTITUTE, INC.  
Name of Corporation

DOCUMENT NUMBER: P02000019255

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:

LINDSEY TUTTLE

Name of Contact Person

MARKET TRADERS INSTITUTE, INC  
Firm/Company

3900 MILLENIA BLVD  
Address

ORLANDO, FL. 32839  
City/State and Zip Code

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

For further information concerning this matter, please call:

LINDSEY TUTTLE

Name of Contact Person

at ( 407 ) 740-0900 (ext. 607)  
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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MARKET TRADERS INSTITUTE, INC
2. The principal office address: 3900 MILLENIA BLVD  
ORLANDO, FL 32839
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 2/18/2002 Document number: P02000019255

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)

ADDRESS: 400 COLONIAL CENTER PARKWAY  
350, LAKE MARY, FL 32746  
AGENT: MARTINEZ, JACOB N

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

ADDRESS: 3900 MILLENIA BLVD  
ORLANDO, FL 32839  
P.O. Box NOT acceptable  
AGENT: MARTINEZ, ISAAC

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]  
Signature of an officer or director

JACOB MARTINEZ, 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]  
Signature of Registered Agent

8/25/2016  
Date

If signing on behalf of an entity:

ISAAC MARTINEZ  
Typed or Printed Name

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