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☐ PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MACK FORE & STRIKE 1-1010INGS, INC. (Name of corporation)
DOCUMENT NUMBER: Poloco 13 24 83
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:
MHTIHEW J COHEN (Name of person)
MIRCK FORE & STOULE HOLDINGS, INC. (Name of firm/company)
1918 COPPENITE DIVE (Address)
BOYNTON BEACH, FL. 33 426 (City/state and zip code)
For further information concerning this matter, please call:
Tin A THIMLAR at (511) 742-4234 ext

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a \$35.00 check made payable to the Department of State.

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

this s	suant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, statement of change is submitted for a corporation organized under the laws of the State of
	CRIOA in order to change its registered office or registered agent, or both, in the State lorida.
1. Tł	the name of the corporation: $MANK FERE E STRIKE HOLDINGS, INC.$
	he principal office address: 1918 Corpora 19 TE Drive
۵. ۱۱	BOYNTON BEACH, FL 33426
3. Tł	he mailing address (if different): 1918 Congognate ORIVE
_	BRYNTON BEACH, FL 33426
4. D	rate of incorporation/qualification: 12/18/02 Document number: 702 000/3248
	The name and street address of the current registered agent and registered office on file with the lorida Department of State:
\$ 365	motthew (ohen = == ==
)[A.	6500 PARK OF COMMERCE BLUD NEW ?
	BOCA RATON, FL 33467
	The name and street address of the new registered agent (if changed) and /or registered office (if hanged): 1918
The ager	street address of its registered office and the street address of the business office of its registered nt, as changed will be identical.
Suc! auth	th change was authorized by resolution duly adopted by its board of directors or by an officer so horized by the board, or the corporation has been notified in writing of the change.
(Sign	ature of an officer, chairman of vice chairman of the board) MATHEN COHEN CFO (Printed or typed name and title)
	ereby accept the appointment as registered agent and agree to act in this capacity. The agree to comply with the provisions of all statutes relative to the proper and complete formance of my duties, and I am familiar with and accept the obligation of my position as istered agent. Or, if this document is being filed merely to reflect a change in the registered ce address, I hereby confirm that the corporation has been notified in writing of this change. (Signature of Registered Agent) (Date)
If sig	gning on behalf of an entity:
	(Typed or Printed Name) (Capacity)

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