P030000577

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SECRETARY OF STATE ARION

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: MISS PAM PRODUCTIONS, INC. P03000040577

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:

J. Russell Collins Name of Contact Person

Rusty Law, LLC

Firm/Company

2493 US Highway 1 South

Address

Saint Augustine, Florida 32086-6077

City/State and Zip Code

rusty@rustylaw.com

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

For further information concerning this matter, please call:

J. Russell Collins

Name of Contact Person

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

	provisions of sections 607.0502, 617.050			this		
•	mge is submitted for a corporation organ or to change its registered office or regist				_	
	the corporation: MISS PAM PROE					
2. The principal	office address: 4425 US 1 SOUT	H, UNIT 611				
	UGUSTINE, FL 32086					
3. The mailing a	nddress (if different); 4947 Vogel Ro	oad				
	ugustine, Florida 32092-0445					
4. Date of incor	poration/qualification: April 7th, 200	Document number: P030	000405	577		
	d street address of the current registered artment of State; (If resigned, enter resign	÷ -	vith the			
	Matthew P. Masters, Sr.					
	5420 Datil Pepper Road		SEC	2016		
	St. Augustine, Florida 32086		RETA	2018 JUL -2	71	
6. The name and (if changed):	d street address of the new registered age	ent (if changed) and /or registered o		-2 PM 2:		
	Rusty Law, LLC		JATE !	 		
	2493 US Highway 1 South		_	~		
	P.O. Box NOT acceptable					
	Saint Augustine, Florida 320	86-6077	_			
The street address changed will	ess of its registered office and the street be identical.	address of the business office of i	ts registe	red ag	gent.	
Such change was authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been no	d by its board of directors or by an otified in writing of the change.	officer s	0		
///QVA/Signati	ire of an officer or director	Matthew P. Masters, Sr			_	
- I further agrée - verformance of	the appointment as registered agent an to comply with the provisions of all stat my duties, and I am familiar with and a is document is being filed merely to refi that the corporation has been notified i	utes relative to the proper and con accept the obligation of my positio	ni as regi:	sterea ss. T	1	
		06/27/2018				
Sig	nature of Registered Agent	Date			_	
If signing on be	half of an entity:					
J. Russell C	Collins Managing Attorney					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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

Typed or Printed Name AHBR