PD00058/88

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

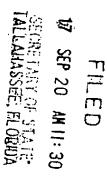




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09/20/17--01013--008 **35.00

SEP 21 2017 S. YOUNG



COVER LETTER

Division of Corporations
SUBJECT: CHANGE OF ADDRESS Name of Corporation
DOCUMENT NUMBER: PO3 0000 58/88
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:
DONALD L. CLEVELAND Name of Contact Person
Name of Contact Person
1100 - 11-110 - 110
MPR-FINTRA, INC. Firm/Company
1700 CONGRESS AVENUE, STE 3/08 Address
Address
BOCA RATON, FL 33487
BOCA RATON, FL 33487 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DONALD CLEVELAND at (561) 338 - 7488 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Enclosed to a boston encourage payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 / 2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

TO:

Amendment Section

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

statement of change is submitted for a	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of
1. The name of the corporation: M	PR-FINTRA, INC
	100 CONGRESS AVENUE, STE 3/08
<u> </u>	CARATON, FL 33487
3. The mailing address (if different):_	5AME
4. Date of incorporation/qualification:	5/28/2003 Document number: P030000 58188
5. The name and street address of the Florida Department of State: (If resi	current registered agent and registered office on file with the igned, enter resigned)
DONALD	CLEVELAND
1300 N,	FEDERALHWY, STE 110
	ATON, FL 33432
(if changed):	new registered agent (if changed) and /or registered office
DONALD	CLEVELAND DO STORED
_7700 Co	NGRESS AVENUE SITE 3108 DE SE DE SITE 3108 DE SITE 3
BOCARA	TON, FL 33487
The street address of its registered of as changed will be identical.	fice and the street address of the business office of its registered agent,
Such change was authorized by resol authorized by the board, or the corpo	ution duly adopted by its board of directors or by an officer so ration has been notified in writing of the change.
Signature of an officer or director	IN Printed or typed name and title
I hereby accept the appointment as re I further agree to comply with the pro- performance of my duties, and I am f agent. Or, if this document is being the hereby confirm that the corporation is	egistered agent and agree to act in this capacity. ovisions of all statutes relative to the proper and complete amiliar with and accept the obligation of mv position as registered filed merely to reflect a change in the registered office address, I has been notified in writing of this change.
Donald H. Olcular Signature of Registered Agent	9/16/17 Date
If signing on behalf of an entity:	
DONALD L. CLEVEL	4·ND
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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