P03000093592

| (Req | uestor's Name) | |
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| (City | /State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Nar | ne) |
| • | • | , |
| (Doc | ument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to F | iling Officer; | |
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COVER LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: MNTG, Inc. (Name of corporation) |
| DOCUMENT NUMBER: PO 3000093592 |
| 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: |
| Lawrence H. Habel, Eguike (Name of contact person) |
| Lawrence H. Haber, P. A. (Firm/Company) |
| 800 Celebration Avenue, Suite 227 |
| Celebration FL 34747 (City/state and zip code) |
| For further information concerning this matter, please call: |
| Lawrence H. Haber (Name of contact person) at (407) 361-4736 (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.

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

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

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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 |
|--|
| . The name of the corporation: MNTG, Inc. |
| 2. The principal office address: ZO N. Orange Avenue, 14th Floor Orlando, FL 33801 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 8/26/03 Document number: P03000093592 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Dean Meade Services, LLC |
| 800 N. Magnolia Avenue, Suita 1500 |
| |
| 6. The name and street address of the new registered agent (if changed) and /or registered office |
| Lawrence H. Haber, P.A. Son Calabration Niewe Suita 727 |
| 800 Calebration Avenue, Suita 227 |
| Celebration, Florida 34747 |
| 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 of an officer of Afrector) Rubyr T Polling (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 of Registered Agent] (Signature of Registered Agent) |
| If signing on behalf of an entity: |

* * * FILING FEE: \$35.00 * * * MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

(Typed or Printed Name)