## P03000107291

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
•	•	
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	)
•		
Certified Copies	Certificate	s of Status
Certified Copies	_ Ociuloate	.5 Of Ottation
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

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: Faster, Jones + Mason Jac.
2. The principal office address: 10240 1110 4/6th St.
3. The mailing address (if different):
4. Date of incorporation/qualification: 15/01/03 Document number: P03000107291
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Laurence King
10240 NW 46th St.
Survise 7. FL 3.335/ 2 3
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Markin Kina
7154 N University Dr. Suita 290 35 5 5 Tamarac Fr. 333321
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 or director)  (Signature of an officer or director)  (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.
Machine of Registers Agent)  (Signature of Registers Agent)  (Date)
If signing on behalf of an entity:
- Walter State (Type for Printed Name)
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)