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EACHY CRC, 130

TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: MWB ENTERPRISES, INC. (Name of corporation)								
(Name of corporation)								
DOCUMENT NUMBER: FEL # 20-0276876								
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:								
MARSH W. BATES (Name of person)								
MWB ENTERPRISES, INC								
(Name of firm/company)								
1621 BOATHOUSE CIECLE #HA-123								
(Address)								
SAKASOTA, FLORIDA 34231 (City/state and zip code)								
For further information concerning this matter, please call:								
MARSH W. BATTES at (941) 953-5757 (Area code & daytime telephone number)								
Enclosed is a \$35.00 check made payable to the Department of State.								
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399								

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

_	provisions of section ted for a corporati				_	_	ement of in order
	istered office or re						_un or acr
1. The name of the	he corporation:	MWB	ENTERA	PRISES	luc.		
	office address:	1621	BOATH			# HA-17	23
		SARA:	SOTA, F	-L 34	23]		
3. The mailing ad	ddress (if different)	:					
4. Date of incorp	oration/qualification	on: 10/1/6	23Doc	cument numbe	er.FIEI #	20-02.76	<u>876</u>
	street address of th	• /				•	
		L. RAJ					FIRM)
	_	5. Oe					
	J'ARAS	SOTA, F	LORIDA	4		-4.03.6	3
6. The name and (if changed):	street address of th	ne new registere	d agent (if chan	ged) and /or re	egistered offic	2000年	B TI
	CHRIS	TOPHER	K. 1	DATES		X	6
	1621	BOATHO		RCLA.	# HA	-/23	1
	Saara		rsonal mailbox NOT	acceptable)		10 C	
	SARAS		542	3	<u> </u>		F
The street address changed will be	ss of its registered identical.	office and the	street address o	of the business	s office of its	registered ager	ıt, as
Such change was	s authorized by re corporation has b	solution duly a seen notified in	dopted by its be writing of the o	oard of directe change.	ors or by an o	officer so author	rized by
	gnature of an officer or of	lirector)		MARSH Y	V. BATES	SECRETAR	24 TREASURER
I hereby accept i I further agree to duties, and I am being filed merei	the appointment a o comply with the familiar with and ly to reflect a char writing of this cha	s registered age provisions of a accept the obli age in the regis	li statuteš relat	o act in this c	apacity.	olete performan Or, if this do t the corporatio	ce of my cument is on has
CE	2	-		4	1/Alo	4	
(5	Signature of Registered	Agent)			(Dat	<i>ा</i> ज	
If signing on beh	nalf of an entity:						
	(Typed or Printed Name	<u></u>		<u> </u>	(Capa	nity)	
	, ,,	•			(Caba		

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