

PO4000064712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

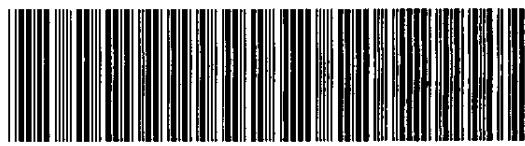
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300188707303

10 DEC 17 AM 11:29
FLORIDA STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/17/10--01010--022 **35.00

RABD/Ch8
10/23/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: _____ **Mold Master Pros, Inc.**
Name of Corporation

DOCUMENT NUMBER: P04000064712

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:

Candice Beaubien
Name of Contact Person

Mold Master Pros, Inc.

6312 US Highway 301 N #211
Address

Ellenton, Florida 34222
City/State and Zip Code

moldmasterpros@tampabay.rr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

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 Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Mold Master Pros, Inc.
2. The principal office address: 3715 59th Ave Circle East
Ellenton, Florida 34222
3. The mailing address (if different): 6312 US Highway 301 N #211
Ellenton, Florida 34222
4. Date of incorporation/qualification: April 9th, 2004 Document number: P04000064712
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
George Beaubien
3715 59th Ave Circle East
Ellenton, Florida 34222
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Candice Beaubien
3715 59th Ave Circle East
P.O. Box NOT acceptable
Ellenton, Florida 34222

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.

Candice Beaubien
Signature of an officer or director

Candice Beaubien /President/ Secretary
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.

Candice Beaubien
Signature of Registered Agent

12/15/2010
Date

If signing on behalf of an entity:

Candice Beaubien
Typed or 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

10 DEC 17 AM 11:29
FLORIDA STATE
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA