Posooo21997

(Requestor's Name)		
(Address)		
(Address)		
·	·	
	ry/State/Zip/Phone	. 40
(Cit	.y/State/2ip/Pilone	;
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nan	ne)
(, , , , , , , , , , , , , , , , , ,	,
(Do	cument Number)	
		•
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	<u> </u>
Special Instructions to Filing Officer:		
	•	

Office Use Only



500098760175

05/03/07--01032--003 **35.00

O7 MAY -3 AM 9: 55
SECRETARY OF STAIL

CR RAIL

COVER LETTER

Division of Corporations			
SUBJECT: THE M, FOUR, INC. (Name of Corporation)			
DOCUMENT NUMBER: P05000021997			
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:			
(Name of Contact Person)			
(Name of Contact Person)			
Marcos Zados Waro (Firm/Company)			
(Firm/Company)			
16445 S.W 100 TETTACE (Address)			
(Address)			
Migmi, Pl 33196			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Marcos lodas Wor at (305) 970-1125 (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 Clifton Building Tallahassas 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 statement of change is submitted for a corporation organized under the laws in order to change its registered office or registered agent, or both,	of the State of Floracia
1. The name of the corporation: THE M. FOUR, INC. 2. The principal office address: 16445 S.W 100 7. HIAMI, FI 33190	ERRACE FOR S
3. The mailing address (if different):	Di: Ot
4. Date of incorporation/qualification: 2/10/2005 Document nu	mber: P05000021997
5. The name and street address of the current registered agent and registered Florida Department of State:	
MARCOS RODAS 16445 S.W 100 TE	
	
MIAMI, F/ 331	96
6. The name and street address of the new registered agent (if changed) and (if changed): MAR COS DODAS WOOL	
16445 S.W 100 TER	RACE
MARCOS RODAS WOR 16445 S.W 100 TER (P.O. BOX NOT acceptable) MIAMI, F/ 3319	6
The street address of its registered office and the street address of the bus as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of d authorized by the board, or the corporation has been notified in writing o	irectors or by an officer so f the change.
Marcoo Radas Woo Marcos K	0045 Woo - PRESIDENT
I hereby accept the appointment as registered agent and agree to act in the I further agree to comply with the provisions of all statutes relative to the of my duties, and I am familiar with and accept the obligation of my position document is being filed merely to reflect a change in the registered office corporation has been notified in writing of this change.	his capacity. proper and complete performance tion as registered agent. Or, if this address, I hereby confirm that the
Marcor Rados Woo	1/07
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	

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

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