

P05000062172

(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



800128518068

05/07/08--01013--018 ++35.00

FILED
08 MAY -7 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RACER
5/12/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MASON AND Kennedy inc.
(Name of Corporation)

DOCUMENT NUMBER: PO5000062172

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:

Cynthia Mason
(Name of Contact Person)

MASON AND Kennedy inc. / DBA White Dog Design
(Firm/Company)

1800 Northgate Blvd, A7
(Address)

SARASOTA FL 34234
(City/State and Zip Code)

For further information concerning this matter, please call:

Cindy Mason at (941) 358-8080
(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
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: MASON AND KENNEDY, INC
2. The principal office address: 1800 Northgate Blvd, Suite a7,
Sarasota FL 34234
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 4/27/05 Document number: PO5000062172

5. The name and street address of the current registered agent and registered office on file with Florida Department of State:

73 South Palm Ave, Suite 210
Sarasota, FL 34236

FILED
08 MAY - 7 PM 2:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

1800 Northgate Blvd, Suite a7
Sarasota FL 34234
(P.O. Box NOT acceptable)

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]
(Signature of an officer or director)

Cynthia Mason
(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]
(Signature of Registered Agent)

May 5 2008
(Date)

If signing on behalf of an entity:

Cynthia Mason
(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