## P05000122114

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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

Division of Corporations
SUBJECT: M Consulting of Tanga, Inc.
DOCUMENT NUMBER: P05000122114
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)
(Firm/Company)
P.O. Box 24567  (Address)
Tanga, FL 33623 (Cit)/State and Zip Code)
For further information concerning this matter, please call:
Tohn Stanton at (813) (21-464) (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

TO:

Amendment Section

## 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: M Consulting of Tanga, Inc.  2. The principal office address: 3110 Falkenburg Rd, Tanga, FL 3360	19
3. The mailing address (if different): P. D. BOX 24567, Tarypa, FL 336	
4. Date of incorporation/qualification: <u>109/02/05</u> Document number: <u>PD5000122111</u>	4
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)	
Chad S. Bowen	
400 N. Ashley Drive, Suite 2540	355
Tampa, FL 33602	经
400 N. Ashley Drive, Suite 2540  Tampa, FL 33602  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  John Stanton	RY OR SH
John Stanton	1. O
USA4 COUNTURA. S'TI	(), (),
Seffner, FL 33584	
The street address of its registered office and the street address of the business office of its registered agas changed will be identical.	ent,
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.	
(Significer of director)  (Significant of the director)  (Printed or typed name and fille)	<u>ko</u> r
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 perform of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if document is being filed merely to reflect a change in the registered office address, I hereby confirm that corporation has been notified in writing of this change.	ance this the
956	
(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

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