

P07000105 454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

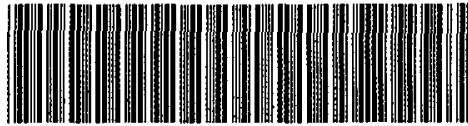
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200283335062

03/18/16--01030--007 \*\*35.00

FILED  
2016 MAR 18 P 1:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 24 2016  
T. CHAMBERLAIN

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** INTERPLEX PROTO-STAMP, INC  
Name of Corporation

**DOCUMENT NUMBER:** P07000105454

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:

Chuck Mastrarrigo

Name of Contact Person

INTERPLEX PROTO-STAMP

Firm/Company

6690 Hiatus Road

Address

Tamarac FL 33321

City/State and Zip Code

chuck.mastrarrigo@us.inteplex.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chuck Mastrarrigo

Name of Contact Person

at ( 954 ) 718-1700

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

1. The name of the corporation: Interplex Proto-Stamp, Inc.

2. The principal office address: 6690 Hiatus Road, Tamarac FL 33321

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 9/24/2007 Document number: P07000105454

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)

MICHAEL GREENSPAN

920 SW 21 TERRACE

FT LAUDERDALE, FL 33312

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

CHUCK MASTRARRIGO

6690 HIATUS ROAD

P.O. Box NOT acceptable

Tamarac, FL 33321

2016 MAR 18 P 1:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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 of an officer or director

STEVEN FEINSTIEN, VP

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 of Registered Agent

2/23/2016  
Date

If signing on behalf of an entity:

CHUCK MASTRARRIGO

Typed or Printed Name

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