P08000069757

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	MCR PASSION Name of Con	NS, INC.					
DOCUMENT NUMBER:	P080	00069757					
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:							
PETER SAVINEAU Name of Contact Person							
Name of Contact Person							
MOD DADTNIERS INC							
MCR PARTNERS, INC. Firm/Company							
20533 BISCAYNE BLVD (1301)							
	Addre	SS					
MIAMI, FL 33180 City/State and Zip Code							
MODDADTNEDO OVALIGO COM							
MCRPARTNERS@YAHOO.COM E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
PETER SAV Name of Contact		at (305) 725-7405 Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.							
Mailing	Address:	Street Address:					
	ment Section	Amendment Section					
	n of Corporations	Division of Corporations					
P.O. Bo		Clifton Building					
i allaha	ssee, FL 32314	2661 Executive Center Circle					

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a co	orporation organized	07.1508, or 617.1508, Flo I under the laws of the Sta I agent, or both, in the Sta	te of FLORIDA
1. The name of t	the corporation: MCF	PASSIONS,	INC.	
2. The principal MIAMI_FI				
-				
4. Date of incorp	ooration/qualification:	07/24/2008	_ Document number:	P08000069757
	I street address of the curtiment of State: (If resign		and registered office on f	ile with the
	CORPORATION	SERVICE COMP	PANY	
	1201 HAYS STRE	ET		
	TALLAHASSEE F			MAR I
6. The name and (if changed):	street address of the nev	w registered agent (if	`changed`) and /or register	, is
	MCR PARTNERS	, INC.		
	20533 BISCAYNE	P.O. Box NOT acco	eptable	
	MIAMI, FL 33180			·
The street addre as changed will	ss of its registered offic be identical.	e and the street add	ress of the business office	e of its registered agent,
ū			its board of directors or d in writing of the chang	
Signature	e of an officer or director		T. P. SAVINEAU Printed or typed name	PRESIDENT e and title
I hereby accept i I further agree to of my duties, and document is bein corporation has	the appointment as regi o comply with the provi d I am familiar with and ng filed merely to reflec been notified in writing	stered agent and ag sions of all statutes I accept the obligati t a change in the reg of this change.	ree to act in this capacit relative to the proper an on of my position as regi gistered office address, T	y. d complete performance stered agent. Or, if this hereby confirm that the
Sign	ature of Registered Agent		03/01/2	011
If signing on beh	nalf of an entity:			
P. SAVINEAL	J - MCR PARTNER ped or Printed Name	S, INC.		

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