

P08UWU84325

(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

11-507



900162281339

11/02/09--01029--013 **35.00

FILED

2009 NOV -2 PM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RP
C/mg
SG

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: D.J. MACK, INC.
Name of Corporation

DOCUMENT NUMBER: P08000084235

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:

FRANK SEIBERT
Name of Contact Person

D.J. MACK, INC.
Firm/Company

9141 TAFT STREET
Address

PEMBROKE PINES, FL 33024
City/State and Zip Code

FRANKS@RESTARTNATION.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANK SEIBERT at (954) 237-1957
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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: D.J. MACK, INC.
2. The principal office address: 9141 TAFT STREET
PEMBROKE PINES, FL 33024
3. The mailing address (if different): _____
4. Date of incorporation/qualification: SEPT 15 2008 Document number: P08000084235
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)

DAVID J. MCINTYRE

9342 NW 23 STREET

PEMBROKE PINES, FL 33024

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

FRANK SEIBERT


9141 TAFT STREET

P.O. Box NOT acceptable

PEMBROKE PINES, FL 33024

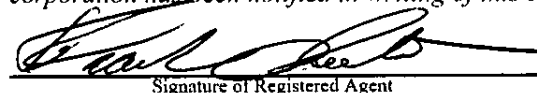
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

FRANK SEIBERT
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

10/28/2009
Date

If signing on behalf of an entity:

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

CR2E045 (8/05)

FILED
2009 NOV -2 PM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA