1000037243

(Requestor's Name) (Address) (Address)	5001585282
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	97/20/0901006010
(Business Entity Name) (Document Number)	
Certified Copies Certificates of Status	i de la compania del compania de la compania del compania de la compania del compania de la compania de la compania de la compania del compania de la compania de la compania de la compania del compania
Special Instructions to Filing Officer:	CORE TARY OF STATE LAHASSEE, FLORIDA
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**35.00

FIED

COVER LETTER

TO: Amendme Division o	nt Section f Corporations	
SUBJECT:	Master Force Cons	truction, Corp.
DOCUMENT NU	MBER: P09	000037243
The enclosed State	ment of Change of Registered Offic	e/Agent and fee are submitted for filing.
Please return all co	rrespondence concerning this matter	to the following:
	Robert D	eHarder
	Name of Co	ntact Person
	Firm/Co	mpany
	1102 Dal	Mor Cir
	Add	Mar Cir.,
	,,,,,	
	W. Melbourn	e FI 32904
	City/State ar	d Zip Code
_	wedomarketing E-mail address: (to be used for f	@gmail.com
	E-man address. (to be used for r	dure annual report nonneation)
For further informa	ation concerning this matter, please of	all:
f	Robert DeHarder	at (888) 948-4262
Nar	ne of Contact Person	at (<u>888</u>) <u>948-4262</u> Area Code & Daytime Telephone Number
Enclosed is a \$35.0	00 check made payable to the Depart	ment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

TO:

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

statement of ch	ange is submitted for a c	orporation organize	607.1508, or 617.1508, Flo d under the laws of the Stat d agent, or both, in the State	e of FLORIDA
	the corporation: Mast		truction, Corp. 23, Lewisburg, PA 17	837
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification:	04/27/2009	Document number:	P09000037243
	d street address of the curtiment of State: (If resign		at and registered office on fi	le with the
	Corporation Service	ce Company		
	1201 Hays Street			7 2
	Tallahassee, FL 3			SECH SECH
6. The name and (if changed):			f changed) and /or registere	TALLAHASSEE. FLORID
	Robert J. DeHarde	er	· · · · · · · · · · · · · · · · · · ·	
	1102 Del Mar Cir.,		ceptable	\$
	W. Melbourne, FL		ceptable	
_	ess of its registered offi- be identical.	ce and the street add	dress of the business office	
Such change was authorized by the	as authorized by resoluthe board, or the corpora	tion duly adopted by ation has been notifi	y its board of directors or bed in writing of the change	by an officer so e.
C.S. Signatu	re of an officer or director		C.L. Kk	OSE PRESIDENT
~		ristered agent and a visions of all statutes ad accept the obligat ct a change in the re g of this change.	gree to act in this capacity s relative to the proper and tion of my position as regi egistered office address, T	
Sig	haptire of Registered Agent		Robert J. De	Harder
	V_{ℓ} half of an entity:			
	yped or Printed Name			

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