P09000099789

•					
(Requestor's Name)					
(Address)					
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(Address)					
(City/State/Zip/Phone #)					
(only-online lay					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Degument Number)					
(Document Number)					
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SEGRETARY OF STATE

Mochange Newis 8-16-11

COVER LETTER

TO:	Amendment Division of C	Section Corporations			
SUBJ	ЕСТ:	MJCHE Name of	V, Inc.		
DOCI	UMENT NUM		9000099789		
The er	nclosed Stateme	ent of Change of Registered Off	fice/Agent and fee are submitted for filing.		
Please	return all corre	espondence concerning this mat	ter to the following:		
			Chevrier		
		Name of C	Contact Person		
MJCHEV, Inc.					
	•	Firm/	Company		
700 NE Savanna Vista					
	_	A	ddress		
Jensen Beach, FL 34957 City/State and Zip Code					
	Ē	bchevrier@s -mail address: (to be used for	shelfgenie.com r future annual report notification)		
For fu	rther information	on concerning this matter, pleas	e call:		
	I	Bret Chevrier	at (772) 678-0648		
	Name	of Contact Person	at (772) 678-0648 Area Code & Daytime Telephone Number		
Enclos	sed is a \$35.00	check made payable to the Depa	artment 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

statement of cha	nge is submitted for a corporation orga	02, 607.1308, or 617.1308, Florida Statul nized under the laws of the State of <mark>FLO</mark> tered agent, or both, in the State of Florid	RIDA	
	the corporation: MJCHEV, Inc.			
2. The principal	office address: 700 NE Savanna V	ista		
Jensen Be	each, FL 34957	· · · · · · · · · · · · · · · · · · ·	·	
3. The mailing a	ddress (if different):		·· · · · · · · · · · · · · · · · · · ·	
4. Date of incorp	poration/qualification: 1/1/2010	Document number:P090	00099789	
	street address of the current registered a truent of State: (If resigned, enter resigned	agent and registered office on file with the ed)	•	
	Bret Chevrier			
	45 SW Seminole Street, Unit 1			
	Stuart, FL 34994		#g -	
6. The name and (if changed):	street address of the new registered age	nt (if changed) and /or registered office	1 AUG 12 EGRETAR	71
	Bret Chevrier			i
	700 NE Savanna Vista		ရှို့သည်။	
		OT acceptable	29	
	Jensen Beach, FL 34957			
The street address changed will	ess of its registered office and the street be identical.	t address of the business office of its reg	istered agent,	
Such change was authorized by the	as authorized by resolution duly adopte the board, or the corporation has been no	ed by its board of directors or by an offic otified in writing of the change.	cer so	
De		Bret Chevrier - Preside	ent	
/	the appointment as registered agent at to comply with the provisions of all sta d I am familiar with and accept the ob ng filed merely to reflect a change in the been notified in writing of this change	Printed or typed name and title and agree to act in this capacity, tutes relative to the proper and complete ligation of my position as registered age the registered office address, I hereby co	e performance ent. Or, if this nfirm that the	
10	Ef-	8-9-11		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
T	Bret Chevrier yped or Printed Name			

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