

10/09/2013 10:25

Division of Corporations

(FAX)

P.001/002

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P10000046808

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE
MDC CARPENTRY CORP.

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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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: MDC Carpentry Corp.
- 2. The principal office address: 1221 Brickell Ave. Suite 900, Miami, FL 33131
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 06/02/2010 Document number: P10000046808
- 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)

Krista Decastro
1450 Brickell Ave., 23rd Floor
Miami, FL 33131

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

NRAI Services, Inc.
1200 South Pine Island Road
P.O. Box NOT acceptable
Plantation, FL 33324

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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.

MDC
Signature of officer or director

Marco DeCastro President
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 certify that the corporation has been notified in writing of this change.

Michele Holden
Signature of Registered Agent

10/07/13
Date

Michele Holden, Asst. Sect
 If signing on behalf of an entity:

Michele Holden, Assistant Secretary
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

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