P11000035734

| (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: | | | |
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SECRETARY OF STATENS
ONVISION OF CORPORATIONS
12 NOV -5 PH 2: 27

NOV 0 7, 2012

T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: The Mattisyn School, Inc.

Name of Corporation

DOCUMENT NUMBER: P11000035734

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:

Paula Francese

Name of Contact Person

Firm/Company

8289 Okeechobee Blvd.

Address

West Palm Beach, FL 33411

City/State and Zip Code

paulafrancese@me.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paula Francese

_{...}561 \346-1000

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

| statement of cha | ange is submitted for a corporation orgo | anized under the laws of the State of Florida stered agent, or both, in the State of Florida. | |
|--|---|--|-----------|
| 1. The name of | the corporation: The Mattisyn Sch | nool, Inc. | |
| 2. The principal | office address: 8289 Okeechobe | e Blvd, | |
| West Pal | m Beach, Florida 33411 | The state of the s | |
| 3. The mailing a | address (if different): same | | |
| 4. Date of incor | poration/qualification: 04/12/11 | Document number: P11000035734 | |
| | d street address of the current registered rtment of State: (If resigned, enter resigned) | | |
| | Paula Francese, Esq. | 12 SEC | |
| | 1520 Carafe Court | 15 PET 15 | ۱-۱ م |
| | Palm Beach Gardens, FL 3 | i3410 යි මූ | 3,5 |
| 6. The name and (if changed): | d street address of the new registered ag | 33410 gent (if changed) and /or registered office 277 | F SIZIONS |
| | 8289 Okeechobee Blvd., | | |
| | · | OT acceptable | |
| | West Palm Beach, FL 3341 | <u> 1</u> | |
| The street address changed will | ess of its registered office and the stree l be identical. | et address of the business office of its registered agent, | |
| Such change was authorized by the | • | ed by its board of directors or by an officer so notified in writing of the change. | |
| - Paul | a Francese | Paula Francese, President | |
| I hereby accept I further agree performance of agent. Or, if th hereby confirm | t the appointment as registered agent a to comply with the provisions of all sto fmy duties, and I am familiar with and its document is being filed merely to re that the corporation has been notified | Printed or typed name and title and agree to act in this capacity. atutes relative to the proper and complete accept the obligation of my position as registered flect a change in the registered office address, I in writing of this change. | |
| Pau | la Francese | November 1, 2012 | |
| Sig | gnature of Registered Agent | Date | |
| If signing on be | ehalf of an entity: | | |
| Paula Fran | | | |
| Т | Typed or Printed Name | FF. 625 00 + + + | |
| | " " TILING F | EE: \$35.00 * * * | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)