

P120000089183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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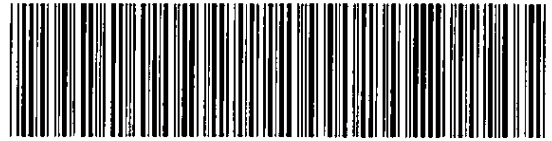
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MBL Incorporated  
Name of Corporation

**DOCUMENT NUMBER:** P12000089183

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:

Brian Leveing  
Name of Contact Person

MBL Incorporated  
Firm/Company

2617 Tarrygong Way  
Address

Wesley Chapel, FL 33543  
City/State and Zip Code

E-mail address: (to be used for future annual report notification) tlwacwesleychapel@gmail.com

For further information concerning this matter, please call:

Brian Leveing at ( 813 ) 713-0868  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: MIBL Incorporated
2. The principal office address: 2617 Terragona Way  
Wesley Chapel, FL 33543
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/23/2012 Document number: P12000089183
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)


United States Corporation Agents, Inc  
476 Riverside Ave  
Jacksonville, FL 32202

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

Brian Levering  
2617 Terragona Way  
P.O. Box NOT acceptable  
Wesley Chapel, FL 33543

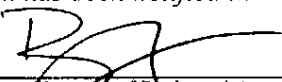
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Brian LEVERING  
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

1/9/2024  
Date

If signing on behalf of an entity:

Brian LEVERING  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

2024 JAN 16 PM 6:30  
ALL DOCUMENTS FILED