

P13000006399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

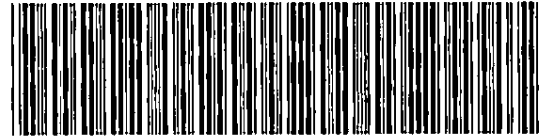
(Business Entity Name)

(Document Number)

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2018 NOV -9 PM 3:14

COVER LETTER

TO: Amendment Section
Division of Corporations

2010 NOV -9 PM 3: 28

SUBJECT: MW Graphic Design, Inc.
Name of Corporation

DOCUMENT NUMBER: _____

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:

K. David Ward
Name of Contact Person

MW Graphic Design, Inc.
Firm/Company

9947 NW 45 St.
Address

Coral Springs, FL 33065
City/State and Zip Code

dward@synergyins.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

K. David Ward at (954) 599-6477
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

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: MW Graphic Design, Inc.

2. The principal office address: 9947 NW 45 St. Coral Springs, FL 33065

3. The mailing address (if different):

4. Date of incorporation/qualification: Document number: P130000006399

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)

K. David Ward
911 NW 114 Ave.
Coral Springs, FL 33071

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

K. David Ward
9947 NW 45 St.
Coral Springs, FL 33065

P.O. Box NOT acceptable

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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.

K. David Ward
Signature of an officer or director

K. David Ward 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 confirm that the corporation has been notified in writing of this change.

K. David Ward
Signature of Registered Agent

11/08/2018
Date

If signing on behalf of an entity:
MW Graphic Design, Inc.
Typed or Printed Name

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