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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: MGMT Management, Inc.

Name of Corporation

DOCUMENT NUMBER, P130000113459

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:

Gregor Kovacs

Name of Contact Person

MGMT Management, Inc.

Firm/Company

104 Crandon Blvd. suite 327

Address

Key Biscayne, Fl. 33149

City/State and Zip Code

gremako@gmail.com

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

For further information concerning this matter, please call:

Gregor Kovacs

,,305 \

3431888

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 chang	ge is submitted for a corpora	02, 617.0502, 607.1508, or 617.1508, Florida Statut ation organized under the laws of the State of Florid se or registered agent, or both, in the State of Florid	a
	e corporation: MGMT Ma		
1. The name of the	corporation: 104 Crand	lon Blvd. suite 327 Key Biscayne, Fl	33149
2. The principal of	ffice address:	ion birar cano cer ricy bioday.io, i	
3. The mailing add	dress (if different):		
4. Date of incorpo	ration/qualification: 04/02	2/2013 Document number: P1300003	0051
5. The name and s		registered agent and registered office on file with the	3
<u> </u>	Anderson Registered	d Agents	
1	1000 North Washing	ton Blvd	
5	Sarasota, Fl 34236		5
(if changed):	_	istered agent (if changed) and /or registered office t, Inc. / Gregor Koucs	LEAPR 18 AM
	104 Crandon Blvd. s	<u>.</u>	AM 9: 4:
 }	Key Biscayne, Fl. 33	P.O. Box NOT acceptable	ယ <u>ၾ</u>
The street address as changed will b	s of its registered office and e identical.	the street address of the business office of its regi	stered agent,
Such change was authorized by the	authorized by resolution du board, or the corporation h	aly adopted by its board of directors or by an office as been notified in writing of the change.	er so
MAK		Gregor Kovacs	
I Hereby accept th I further agree to performance of m agent. Or, if this	comply with the provisions by duties, and I am familiar document is being filed mer	Printed or typed name and title d agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as r rely to reflect a change in the registered office add n notified in writing of this change. 04/14/16	egistered
Signa	ture of Registered Agent	Date	
If signing on beha	alf of an entity:		
Type	ed or Printed Name		

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