

P130000063611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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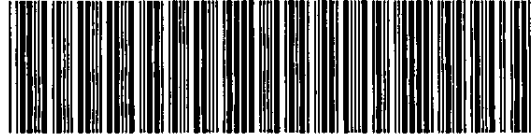
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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JAN 25 2016

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DuShane Management, Inc.

Name of Corporation

DOCUMENT NUMBER: P13000063611

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:

Mark R. DuShane

Name of Contact Person

DuShane Management, Inc.

Firm/Company

105 E. Berckman St. Suite B

Address

Fruitland Park, FL 34731

City/State and Zip Code

markd@dushanemanagement.com

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

For further information concerning this matter, please call:

Mark R. DuShane

Name of Contact Person

at (352) 561-6410

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 13, 2016

MARK R. DUSHANE
DUSHANE MANAGEMENT INC
105 E BERCKMAN ST., STE. B
FRUITLAND PARK, FL 34731

SUBJECT: DUSHANE MANAGEMENT, INC
Ref. Number: P13000063611

We have received your document for DUSHANE MANAGEMENT, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 716A00000857

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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: DuShane Management, Inc.
2. The principal office address: 105 E. Berckman St. Suite B Fruitland Park, FL 34731
3. The mailing address (if different): - same -
4. Date of incorporation/qualification: 7-30-2013 Document number: P13000063611
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)

Mark R. DuShane

501 W. Berckman St.

Fruitland Park, FL 34731

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

Mark R. DuShane

105 E. Berckman St. Suite B

P.O. Box NOT acceptable

Fruitland Park, FL 34731

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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.

Mark R. DuShane
Signature of an officer or director

Mark R. DuShane - 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.

Mark R. DuShane
Signature of Registered Agent

1-19-2016
Date

If signing on behalf of an entity:

Mark R. DuShane
Typed or Printed Name

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