

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P13000073722

**FILED**  
**Dec 12, 2014**  
**Secretary of State**

**Entity Name:** MYFSKI INC

**Current Principal Place of Business:**

338 LUCERO DR  
PORT ST LUCIE, FL 34952 US

**New Principal Place of Business:**

1169 SEAWAY DR  
APT B  
FORT PIERCE, FL 34949 US

**Current Mailing Address:**

4899 ALLINGHAM  
WHITE LAKE, MI 48383 US

**New Mailing Address:**

1169 SEAWAY DR  
APT B  
FORT PIERCE, FL 34949 US

**FEI Number:** 46-3705864

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MAJEWSKI, DANIEL M  
338 LUCERO DR  
PORT ST LUCIE, FL 34952 US

**Name and Address of New Registered Agent:**

MAJEWSKI, DANIEL M  
1169 SEAWAY DR  
APT B  
FT PIERCE, FL 34949 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DANIEL MAJEWSKI

12/12/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: MAJEWSKI, DANIEL M  
Address: 1169 SEAWAY DR APT B  
City-St-Zip: FT PIERCE, FL 34949 US

Title: VP  
Name: MAJEWSKI, ANDREW  
Address: 1169 SEAWAY DR APT B  
City-St-Zip: FT PIERCE, FL 34949 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL MAJEWSKI

PRES

12/12/2014

Electronic Signature of Signing Officer or Director

Date