

P98000011192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

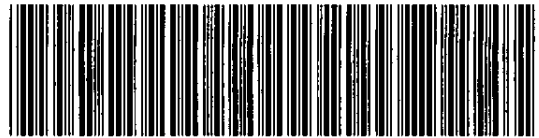
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC 24 PM 3:53

FILED

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12/29/09

R. MICHAEL DE LOACH, P.A.

ATTORNEYS AT LAW

**MILLENNIUM CENTER
1206 MILLENNIUM PARKWAY, SUITE 2001
BRANDON, FLORIDA 33511**

**Mailing Address: Post Office Box 2349
Brandon, Florida 33509-2349**

***R. MICHAEL DeLOACH**

TELEPHONE: (813) 654-3411

FACSIMILE: (813) 654-6912

***Board Certified Civil Trial Lawyer
*Board Certified Construction Lawyer
*Certified County and Circuit Mediator
*Also admitted in New Mexico**

December 22, 2009

Florida Department of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

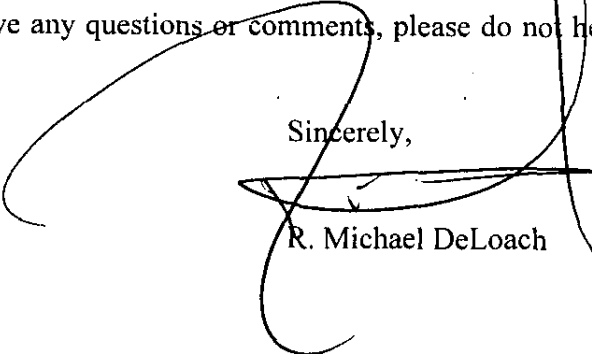
Re: Mar-Bel Sales, Inc.
Document No.: P98000011192

Dear Sir or Madam:

Enclosed for filing, please find a cover letter and Statement of Change of Registered Agent. Also enclosed for the filing fee is this firm's trust account check #3650 made payable to the Florida Department of State in the amount of \$ 35.00.

As always, if you have any questions or comments, please do not hesitate to contact me directly.

Sincerely,



R. Michael DeLoach

RMD/gc
Enclosures
cc: Mar-Bel Sales, Inc.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mar-Bel Sales, Inc.
Name of Corporation

DOCUMENT NUMBER: P98000011192

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:

R. Michael DeLoach, Esq.
Name of Contact Person

R. Michael DeLoach, P.A.
Firm/Company

1206 Millennium Parkway, Suite 2001
Address

Brandon, FL 33511
City/State and Zip Code

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

For further information concerning this matter, please call:

R. Michael DeLoach at (813) 654-3411
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: Mar-Bel Sales, Inc.
2. The principal office address: 11142 Winthrop Market Street, Suite 302
Riverview, FL 33578
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/04/1998 Document number: P98000011192
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)

Jeffrey A. Dowd, P.A.

609 W. Lumsden Road

Brandon, FL 33511

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

R. Michael DeLoach, Esq.

1206 Millennium Parkway, Suite 2001

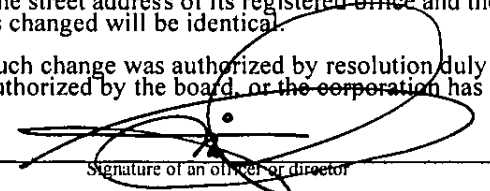
P.O. Box NOT acceptable

Brandon, FL 33511

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.

X


Signature of an officer or director

Vincent M. Belcher, DPST

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

November 24, 2009

Date

If signing on behalf of an entity:

R. Michael DeLoach

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

FILED
2009 DEC 24 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA