

P99000036207

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: M.T. Pockets Corporation
(Name of corporation)

DOCUMENT NUMBER: P99000036207

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:

Bruce Carr
(Name of contact person)

TILT-CON CORPORATION
(Firm/Company)

1003 Orienta Ave
(Address)

Altamonte Springs, FL 32701
(City/state and zip code)

For further information concerning this matter, please call:

Bruce Carr at 407, 834-8458
(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
409 E. Gaines Street
Tallahassee, FL 32399

