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City/State/Zip	Phone #		-	A 2. 38 Care

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1(Corporation Name)	(Document #)
2(Corporation Name)	(Document #) 000034051201 -09/26/0001035020
3(Corporation Name)	*****35.00 ****35.00 (Document #)
4(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Certified Copy Photocopy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other Discrepance And Chg.
CR2E031(7/97)	Examiner's Initials

, 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, the
undersigned corporation organized under the laws of the State of
submits the following statement in order to change its registered office or registered agent, or both, in the
State of Florida.
1. The name of the corporation: MST Of Pain Beach, INC.
2122 (151) 51
2. The mailing address of the corporation:
W.Y.R + L = 33407
3. Data of incompartion/marking 8-18-99 D. 1. 1990007647
3. Date of incorporation/qualification: 5-15-1/ Document number: 5-1000/64/
4. The name and address of the current registered agent and registered office:
Timothit / (N)haten
2-1 0/1 0/1 0/1 0/1 0/1 0/1 0/1 0/1
301 Clematis St. Suiteaco &
10.P.B +1, 23401
5. The name and address of the new registered agent (if changed) and /or registered office (if changed):
Michaels (ife and Deli - Khin 3 to 18
2120 11511 61256 0 17
2100 45th Street 5-11
W.P.B +C 33407
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.
X-10-00
(Signature of an officer chairman or vice chairman of the board) (Date)
Kabin 5. tresti - anner-trident
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated
corporation, 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
performance of my duties and i am familiar with and accept the obligation of my position as registered agent. /
(Lathy MA) (25-00)
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
table James frest!
(Typed or Printed Name) (Capacity)

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