

595653

M.A.C.

1411 Highland Ave
Melbourne, FL.

32908

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500060907295

11/02/05--01012--07 **35.00

FILED
05 NOV -2 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R Achy
CLB
11/13

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Melbourne Athletic Club Inc.
2. The principal office address: 1411 Highland Ave
Melbourne, FL 32935
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/2/05 Document number: S95653

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Rebeca Cordingly
2832 Maderia Circle
Melbourne, FL 32935

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

Emmanuel Lherisse
1966 Garbett Ave SW
(P.O. Box NOT acceptable)
Palm Bay, FL 32908

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 NOV -2 AM 11:57

FILED

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.

[Signature]
(Signature of an officer or director)

Emmanuel Lherisse
(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]
(Signature of Registered Agent)

10/31/05
(Date)

If signing on behalf of an entity:

Emmanuel Lherisse
(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