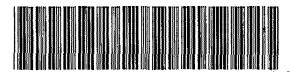
V.02285

(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

KA Chang 515104

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: MAR REFERRAL CORP. (Name of corporation)					
(Ivaine of corporation)					
DOCUMENT NUMBER: V02285					
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:					
Comthia D. Cody					
Cynthia P. Cody (Name of person)					
MAR REFERRAL CORP					
(Name of firm/company)					
· */					
901 W. Indiantown Road #15					
(Address)					
Jupiter, F1. 33458					
(City/state and zip code)					
For further information concerning this matter, please call:					
104 turner intermental concerning and manax, prease car.					
561 746 0775					
Cynthia P. Cody at (561) 746-9775 (Name of person) (Area code & daytime telephone number)					
(radio of posson)					
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address: Street Address:					
Amendment Section Amendment Section					
Division of Corporations P.O. Box 6327 Division of Corporations 409 E. Gaines Street					
Tallahassee, FL 32314 Tallahassee, FL 32399					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		ons 607.0502, 617.0502, tion organized under the t			s, this statement of in order		
		egistered agent, or both, i			in Order		
1. The name of t	he corporation:	MAR REFERRAL CO	ORP.				
2. The principal	office address:						
		Jupiter, Fl. 33	3458				
3. The mailing a	ddress (if differen	1):		-			
4. Date of incorp	ooration/qualificat	ion: <u>12/20/91</u>	Document numb	er: <u>V92285</u>			
	street address of timent of State:	the current registered ages	nt and registered off	ice on file with the			
	Henry	Y. Blakiston			_		
	1001 U	.S. Highway One #	' 600		. —		
		r, Fl. 33477					
6. The name and (if changed):		he new registered agent (if changed) and /or 1	registered office	SECRETAR AL AHASS		
			3 445				
	901	W. Indiantown Roa (P.O. Box or personal mail					
	Jupi	ter, Fl. 33458			FLORIDA		
The street addre changed will be	ss of its registered identical.	d office and the street ad	dress of the busines	ss office of its regis	tered agent, as		
Such change wa the board, or the	s authorized by recorporation has	esolution duly adopted been notified in writing	y its board of direct of the change.	tors or by an officer	so authorized by		
Cutho	PGG. P.	resident					
•	ignature of an officer or	•		P. Cody - Pre	title)		
I hereby accept i I further agree to duties, and I am being filed mere been notified in	the appointment of comply with the familiar with and ly to reflect a chawriting of this ch	is registered agent and a provisions of all statute I accept the obligation o inge in the registered off ange.	igree to act in this of relative to the prof f my position as regice address, I hereb fice address, I hereb	capacity, oper and complete p sistered agent. Or, by confirm that the c	performance of my if this document is corporation has		
A	P Call Signature of Registered		4/2	1			
- J - (Signature of Registered	Agent)		(Date)			
If signing on bel	half of an entity:						
Cyrillia	Caly.		PRESI	lat			
	(Typed or Printed Nam	(c)		(Conneity)			

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