I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 03/20/2014 CHAIRMAN OF THE

BOARD

SIGNATURE: ARMAND MOUW

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail :					
Title	ST	Title	СВ		
Name	WEAVER, JOSHUA S	Name	MOUW, ARMAND		
Address	409 NE 3RD STREET	Address	409 NE 3RD ST		
City-State-Zip:	DELRAY BEACH FL 33483	City-State-Zip:	DELRAY BCH FL 33483		
Title	P	Title	V		
Name	MOUW, RICHARD	Name	WEAVER, JOSHUA S		
Address	409 NE 3RD STREET	Address	409 NE 3RD STREET		
City-State-Zip:	DELRAY BEACH FL	City-State-Zip:	DELRAY BEACH FL		

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

O

SIGNATURE			
	Electronic Signature of Registered Agent		
Officer/Dired	ctor Detail :		
Title	ST	Title	СВ
Name	WEAVER, JOSHUA S	Name	MOUW, ARMAND
Address	409 NE 3RD STREET	Address	409 NE 3RD ST
City-State-Zip:	DELRAY BEACH FL 33483	City-State-Zip:	DELRAY BCH FL 334
Title	Ρ	Title	V

Current Mailing Address: 409 NE 3RD STREET

DOCUMENT# 190741

409 NE 3RD STREET DELRAY BEACH, FL 33483

DELRAY BEACH. FL 33483 US

Entity Name: MOUW ASSOCIATES, INC.

Current Principal Place of Business:

FEI Number: 59-0761310

Name and Address of Current Registered Agent:

MOUW, ARMAND 409 NE 3RD STREET DELRAY BEACH, FL 33483 US

FILED Mar 20, 2014 Secretary of State CC7991476327

Date

Certificate of Status Desired: Yes

Date