308 FREEDOM	ncipal Place of Business: CT EACH, FL 33442			
Current Mai	ling Address:			
308 FREED DEERFIELD	OM CT 9 BEACH, FL 33442 US			
FEI Number: 27-2792200 Certificate			Certificate of Status De	sired: No
Name and A	Address of Current Registered Agent:			
TOBON, NATA 308 FREEDOM DEERFIELD BE				
308 FRÉEDOM DEERFIELD BE	СТ	tered office or regis	tered agent, or both, in the State of F	īlorida.
308 FREEDOM DEERFIELD BE The above named	CT EACH, FL 33442 US	tered office or regis	tered agent, or both, in the State of F	Florida. 01/14/2019
308 FREEDOM DEERFIELD BE The above named	CT EACH, FL 33442 US d entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of F	
308 FREEDOM DEERFIELD BE The above named	CT EACH, FL 33442 US d entity submits this statement for the purpose of changing its regis E: NATALIE TOBON Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of F	01/14/2019
308 FREEDOM DEERFIELD BE The above named SIGNATURE	CT EACH, FL 33442 US d entity submits this statement for the purpose of changing its regis E: NATALIE TOBON Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of F	01/14/2019
308 FREEDOM DEERFIELD BE The above named SIGNATURE Officer/Dire	CT EACH, FL 33442 US d entity submits this statement for the purpose of changing its regis E: NATALIE TOBON Electronic Signature of Registered Agent Ctor Detail :			01/14/2019
308 FREEDOM DEERFIELD BE The above named SIGNATURE Officer/Dire Title	CT EACH, FL 33442 US d entity submits this statement for the purpose of changing its regis E: NATALIE TOBON Electronic Signature of Registered Agent Ctor Detail : P	Title	S	01/14/2019

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.

SIGNATURE: MABEL NORMAN

01/14/2019 INTERIOR DESIGNER

Electronic Signature of Signing Officer/Director Detail

Date

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT Secretary of State

FILED Jan 14, 2019

1833466785CC

Entity Name: M 2 DESIGN GROUP, INC.

DOCUMENT# P10000047010

rrent Principal Place of Pusing