P97000073089

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	—
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(Document Number)	
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Management and Marketing Solution's Inc. (Name of corporation) DOCUMENT NUMBER: FEIN 65-0790460 / P970000 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. 73089
DOCUMENT NUMBER: FEIN 65-0790460/P970000
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:
Phyllis A. Domm, Resident
Management + Marketing Golutions Inc.
5529 Pioneertork Rd.
(Address)
Salt have City UT 84108
(City/state and zip/code)
For further information concerning this matter, please call:
Vay/list Form at 801, 583-5797
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 6, 2004

PHYLLIS A DOMM MANAGEMENT AND MARKETING SOLUTIONS, INC. 5529 PIONEERFORK RD SALT LAKE CITY, UT 84108

SUBJECT: MANAGEMENT AND MARKETING SOLUTIONS, INC.

Ref. Number: P97000073089

We have received your document for MANAGEMENT AND MARKETING SOLUTIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Pamela Smith Document Specialist

Letter Number: 404A00008221

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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: Management and Marketing Solutionis I	n
2. The principal office address: 5539 Pioneer FORK Rd.	
56C UT 84108	
3. The mailing address (if different):	_
P97000073089	7.
4. Date of incorporation/qualification: 8/22/97 Document number: FEIN 65-079046	0
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
_ FHS COMPONITE SERVICES, INC.	
4000 UC HOW KINE SOUTE 300 =	
- NONTH PACM BLACK, FL 33408	
6. The name and street address or the new registered of the new registered of the (if changed):	
PHYLLIS A. Domm PREsident	.
Management Marketing Solutions 1	W
(P.O. Box or personal mailbox NOT acceptable) (P.O. Box or personal mailbox NOT acceptable) (P.O. Box or personal mailbox NOT acceptable)	ho
516 UT. 64108 STUANT FLA	2
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	7
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.	
Spenditure of an officer or director) PHYLLIS A. JOMM (Printed or typed name and title)	V
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 filled 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 of Registered Agent) (Signature of Registered Agent)	
If signing on behalf of an entity:	
PHYLLISH. DOMINI PICE TURES 50	
(Typed or Printed Name) (Capacity)	

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