## P98000000845

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TALLAHASSEE, FLORIDA

RARD CAS ASAM

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: MADE IN AMERICA ENTERTAINMENT, INC.
(Name of Corporation)
DOCUMENT NUMBER: P98000002845
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:
Wendy D. Rea
(Name of Contact Person)
NRAI Services,Inc.
(Firm/Company)
` · · · ·
2731 Executive Park Drive, Suite 4
(Address)
(1.101.000)
Weston, Florida 33331
(City/State and Zip Code)
For further information concerning this matter, please call:
Wendy D. Rea at ( 800 ) 550-6724 ext 502
Wendy D. Rea at (800 ) 550-6724 ext 502 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section  Street Address: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (8/05)

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

1. The name of the corporation: MAD		MADE IN AMERICA ENTERTAINMENT, INC.	
2. The principal	office address:	01 LONGWOOD FL 32750	
3. The mailing ac	ddress (if different):		
4. Date of incorp	oration/qualification:	01/08/1998 Document number: P9800002845	
5. The name and Florida Depart		urrent registered agent and registered office on file with the	
	JOESEPH ,DII	FRANCESCO	
	2005 TREE FOR	K LANE STE 101	A PAGE
	LONGWOOD FL	32750 US	LLAHASSET
6. The name and (if changed):	street address of the no	ew registered agent (if changed) and /or registered office	AHASSEL FEOTING
	NRAI Services	, Inc.	
		er ark brive, Suite 4	
	Weston, FL 3	O. Box NOT acceptable) 33331	
The street addre	ss of its registered off be identical.	ice and the street address of the business office of its registered ag	ent,
Such change wa	s authorized by resolue board, or the corpor	ution duly adopted by its board of directors or by an officer so ration has been notified in writing of the change.	
	re of an officer or director)	Jack DANON  (Printed or typed name and title)	
I hereby accept I further agree to of my duties, and document is being corporation has	the appointment as re	rgistered agent and agree to act in this capacity, wisions of all statutes relative to the proper and complete perform, and accept the obligation of my position as registered agent. Or, if ect a change in the registered office address, I hereby confirm that and of this change.	ance fhis the
If signing on bel	half of an entity:		
Mondy D. D.	ea, Assistant Sec	retary	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)