P05000006922

(Re	equestor's Name)	
`	·	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
<u></u>		
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
	ocument Number)	
(DC	ournent Humbery	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
·		
	/	

Office Use Only



000075444710

Afchange

05/30/06--01045--004 **75.00

SECRETARY OF STATE

SECRET

COVER LETTER

TO: Amendment Section Division of Corporations
·
SUBJECT: SERENDIPITY REAL ESTATE SERVICES, INC.
(Name of Corporation)
DOCUMENT NUMBER: P05000006922
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:
thomas j. ieracitano
(Name of Contact Person)
(Firm/Company)
105 westmoreland circle (Address)
(/1441-655)
kissimmee, FL 34744
(City/State and Zip Code)
For further information concerning this matter, please call:
W 10 W 20
thomas j. ieracitano at (321) 624-5477 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(· ··································
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



May 30, 2006

THOMAS J. IERACITANO 105 WESTMORELAND CIRCLE KISSIMMEE, FL 34744

SUBJECT: SERENDIPITY REAL ESTATE SERVICES, INC.

Ref. Number: P05000006922

We have received your document for SERENDIPITY REAL ESTATE SERVICES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

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) 245-6905.

Letter Number: 106A00037520

Thelma Lewis
Document Specialist Supervisor

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: serendipity real estate services,inc.
2. The principal	office address: 2334 indian mound trail kissimmee, fl 34746
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 01/12/2005 Document number: P05000006922
	street address of the current registered agent and registered office on file with the tment of State:
	Patricia M. Jones
	2334 indian mound trail kissimmee, fl 34746
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office thomas j. ieracitano 9738 W. irlo bronson hwy clermont, fl 34711 (P.O. Box NOT acceptable)
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
P	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. Patricia M. Jones (Printed or typed name and title)
I hereby accept I further agree to of my duties, an document is bai corporation has sig If signing on be	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of a manufactural to reflect a change in the registered office address, I hereby confirm that the spen notified in writing of this change. The appointment as registered agent and agree to act in this capacity. Or, if this not familiar with and accept the obligation of my position as registered agent. Or, if this not filled merely to reflect a change in the registered office address, I hereby confirm that the spen notified in writing of this change. The appointment as registered agent. Or, if this registered of my position as registered agent. Or, if this not filled in writing of this change. The appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity. The appointment as registered agent. Or, if this not filled in writing of this change. The appointment as registered agent. Or, if this not fill the proper and complete performance at a proper at a p

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