P08000041962

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: REEDER COMMERCIAL REAL ESTATE, INC.			
Name of Corporation			
DOCUMENT NUMBER: P08000041962			
The enclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning thi	is matter to the following:		
PATRICIA REEDER			
Name of Contact Person			
Firm/Company			
1108-8TH AVENUE WEST #201			
Address			
PALMETTO, FL 34221			
City/State and Zip Code			
E-mail address: (to be used for future annua	al report notification)		
r. man address. (a) be used for rature annual	arreport notification)		
For further information concerning this matter,	please call:		
	at (
Name of Contact Person	at () Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the	e Department of State.		
Mailing Address: Amendment Section	Street Address:		
	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		
	Tallahassee, FL 32303		

CR2E045 (04/13)

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

statement of cl	iange is submitted for a corporat	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ion organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.	
1. The name of the corporation: REEDER COMMERCIAL REAL ESTATE, INC. 2. The principal office address: 1108-8TH AVENUE WEST #201 PALMETTO, FL 34221			
3. The mailing	address (if different):		
		08 Document number: P08000041962	
	nd street address of the current re artment of State: (If resigned, ent	gistered agent and registered office on file with the er resigned)	
	John V. Quinlan, Esq.		
	601 12th Street West		
	Bradenton, FL 34205		
6. The name at (if changed)	_	tered agent (if changed) and /or registered office	
	Michael M. Hamrick		
	601 12TH ST WEST	ယ္	
	BRADENTON, FL 34205	P O Box NOT acceptable	
The street add as changed wi	ress of its registered office and t	the street address of the business office of its registered agent	
Such change vauthorized by	vas authorized by resolution dul the board, or the corporation ha	y adopted by its board of directors or by an officer so s been notified in writing of the change.	
Patricia R	Pecder	Patricia Reeder, President	
I hereby accept further agree of my duties, a document is be	to comply with the provisions o	Panted or typed name and title agent and agree to act in this capacity, of all statutes relative to the proper and complete performance of the obligation of my position as registered agent. Or, if the inge in the registered office address, I hereby confirm that the s change.	
Michael W	N. Hamrick	10/21/2020	
	gnature of Registered Agent chalf of an entity:	Date	
	Typed or Printed Name	<u> </u>	
	* * * F]]	LING FEE: \$35.00 * * *	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)