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## **COVER LETTER**

SUBJECT: The Commodore Sales	& Rental Corn					
SUBJECT: The Commodore Sales & Rental Corp.  Name of Corporation						
DOCUMENT NUMBER: VE	65151					
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to	the following:					
Patty Su	bjek					
Name of Conta	ct Person					
The Commodore Sales & Rental Corp.						
Firm/Com	pany					
4715 Thomas Drive						
Addres	S					
Panama City Beach, FL. 32408  City/State and Zip Code						
lynn@commodorecondo.com						
E-mail address: (to be used for fute	re annual report notification)					
For further information concerning this matter, please call	:					
Jennifer Goodwin	at ( 850 ) 234-8699 Area Code & Daytime Telephone Number					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Departme	ent of State.					
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations					

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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TO:

Amendment Section Division of Corporations

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

statement of ch	ange is submitted for a co	orporation organiz	607.1508, or 617.1508, Flor, ed under the laws of the State ed agent, or both, in the State	of Florida
1. The name of	the corporation: The C	Commodore S	Sales & Rental Corp	oration
	office address: 4715 T			
Panama (	City Beach, FL. 3240	)8		
3. The mailing a	address (if different): (Sa	ame)		
4. Date of incor	poration/qualification:	9/18/1992	Document number:	V65151
	d street address of the current of State: (If resign		nt and registered office on file	e with the
	Carol D. Smith			<u>.</u>
	409 Beth Street			_
	Panama City Beac	h, FL 32407		 
6. The name and (if changed):	d street address of the new	w registered agent (	(if changed) and /or registered	11 SEP 19 PHI2: 47
	Jennifer L. Goodw	in		9 P
	4405 Huckleberry			
	D	P.O. Box NOT a	cceptable	15 Exe
	Panama City, FL. 3	32409		
The street addre as changed will	ess of its registered office be identical.	e and the street ad	dress of the business office	of its registered agent,
Such change was authorized by the	as authorized by resolut ne board, or the corpora	ion duly adopted b tion has been notif	by its board of directors or by ited in writing of the change.	an officer so
Signalu	re of an officer or director	<del></del>	Leland Davis/F	President
I hereby accept I further agree to of my duties, and document is beit corporation has	the appointment as reg to comply with the provi d I am familiar with an ing filed merely to reflec s been notified in writing	istered agent and isions of all statuted accept the obligated a change in the igo of this change.	agree to act in this capacity, es relative to the proper and ution of my position as regist registered office address, I h	complete performance tered agent. Or, if this ereby confirm that the
Inn	ight Goody natife of Registered Agent	an	9/14/201 Date	1
If signing on be	half of an entity:			•
T	yped or Printed Name	<del></del>		

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