P05000004291

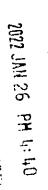
(Requestor's Name)	
	(Address)	<u> </u>
((Address)	
(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
((Business Entity Name)	
((Document Number)	_
Certified Copies	Certificates of Statu	s
Special Instructions	to Filing Officer:	
	Q. SILAS	
F	EB 10 2022	

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Allen Really & In Inc. Name of Corporation
DOCUMENT NUMBER: P0500004291
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:
Name of Contact Person Allen Realty & Frv. Inc Firm/Company 14949 Green Valley Blv. Address Clerment Fla 311711 City/State and Zip Code
Allen Realty & Frv. Inc
Firm/Company
Address Address
Clorment Pla 311711 City/State and Zip Code
City/State and Zip Code Linda, allen really agnail, com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at 407 810 -00 99 Area Code & Daytime Telephone Number
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

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04-13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 $Florida$
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Allen Really & Investments, In C. 2. The principal office address: 20486 The Granada Unit 7
2. The principal office address: 20486 The Granada Unit 7
Dunnellon Fla. 34432
Dunnellon Fla. 34432 3. The mailing address (if different): 14949 Green Valley Blvd Clermont 34711 4. Date of incorporation/qualification: Jan 10, 2005 Document number: P05000064291
4. Date of incorporation/qualification: \(\frac{\lambda_0}{\lambda_0} \) Document number: \(\frac{P \infty 5000064291}{\lambda_0} \)
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Leonard Baird (deceased)
6365 W. Hwy 50
Clermont Pla 34711
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
StoRhanie Wilson
(if changed): Staghanie Wilson 8965 SW 213 Rd P.O. Box NOT acceptable
P.O. Box NOT acceptable
Dunnellon Flo. 34431
The street address of its registered office and the street address of the business office of its registered agent. as changed will be identical.
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.
Signature of an officer or director Signature of an officer or director Signature of an officer or director Printed or typed name and title
l 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 filed 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 Date
If signing on behalf of an entity:
Typed or Printed Name

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

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