## 725671

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	<u>-</u>
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SECRETARY OF STATE TALLAHASSEE FLORIDA



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Sheoah High lands INC Chame of Corporation)
DOCUMENT NUMBER: 72567/
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;
Karen Paine Maleo/m (Name of Contact Person)
Paine-Anderson Properties Inc (Firm/Company)
PO Box 195771 (Address)
Winter Springs FL32708 (phy/State and Rip Code)
For further information concerning this matter, please part:  Karen Paipe Mg/Co/m at (407) 695-2854  (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 Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## 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.
$\sim$
1. The name of the corporation: Deoah 1719h lands 1NC
2. The principal office address: 70 Sheoah BLUD # 42 Winter Spring
F2 32708
3. The mailing address (if different): 274 W//Shiro BLVD, STeasa, Lassell
: PD Box 195771, Winter Springs FL 32708
4. Date of incorporation/qualification: 2-27-23 Document number: 72567
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
274 Wilshire BLVD Ste 282
Casselberry FL32708 Fig 8
6. The name and street address of the new registered agent (if changed) and /or registered office = = = = = =
(if changed):
PAINE-Anderson Properties, In 20
680 WEST S.R. 434
(P.O. Box NOT acceptable)
Winter Springs, Fl. 32708
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.
It was hel President KAREN Paine-Markot
(Signature of an officer or director) (Printed or typed name and title)
I 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.
10/12/06
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
KAREN Paine-MAlcolm
(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 (8/05)

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