733220

(Re	equestor's Name)	-
(Ac	ldress)	
(Ac	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

P. G. TWO HOMEOWNERS, INC. 733220 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: David D. Iglesias, Esq. Name of Contact Person Pestcoe & Iglesias, A Partnership of P.A.s Firm/Company 2500 Weston Road, Suite 209 Address Weston, FL 33331 City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David D. Iglesias

Name of Contact Person

954 617-0300
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

TO:

Amendment Section Division of Corporations

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

statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: P. G. TWO HOMEOWNERS, INC.
2. The principal office address: 1650 NW 68 AVE MARGATE, FL 33063
3. The mailing address (if different):
4. Date of incorporation/qualification: 06/30/1975 Document number: 733220
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)
David D. Iglesias, Esq.
1900 North Commerce Parkway
Weston, FL 33326
Weston, FL 33326 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Pestcoe & Iglesias, A Partnership of Prof. Assoc.
2500 Weston Road, Suite 209
P.O. Box NOT acceptable
Weston, FL 33331
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.
Sharen R Hevia, President Signature of an officer or director Signature of an officer or director Signature of an officer or director
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.
Signature of Registered Algent Date
If signing on behalf of an entity:
David Experiors
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314