

768932

(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:

Judith  
M. Nelson called  
& she will be the R.A.  
DE  
2-3-15  
DC

Office Use Only



000268082790

01/20/15--01028--015 \*\*35.00

FILED  
15 FEB -3 AM 9:14  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

RA CHANGE  
DC  
2-3-15

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PORT CARLOS COVE INC

Name of Corporation

**DOCUMENT NUMBER:** 768932

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:

JUDITH M. MELSON

Name of Contact Person

PORT CARLOS COVE INC.

Firm/Company

1802 MAIN STREET

Address

FORT MYERS BEACH FL. 33931

City/State and Zip Code

PORTCARLOSCOVE@YAHOO.COM

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

For further information concerning this matter, please call:

JUDY MELSON

Name of Contact Person

at 239-463 5457

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.

1. The name of the corporation: PORT CARLOS COVE INC
2. The principal office address: 1802 MAIN STREET  
FORT MYERS BEACH FL. 33931
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: JUNE 15, 1983 Document number: 768932

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)

GOEDE, ADAMCZYK & DEBOEST - RESIGNED

2030 MCGREGOR BLVD

FORT MYERS FL. 33901

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Judith M. Melson

1802 MAIN STREET

P.O. Box NOT acceptable

FORT MYERS BEACH FL. 33931

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.

Richard Hobot  
Signature of an officer or director

RICHARD HOBOT, PRESIDENT

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.*

Judith M. Melson  
Signature of Registered Agent

JANUARY 14, 2015

Date

If signing on behalf of an entity:

JUDITH M. MELSON

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

CR2E045 (03/12)

FILED  
15 FEB - 3 AM 9:14  
DIVISION OF STATE  
TALLAHASSEE, FLORIDA