

817595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

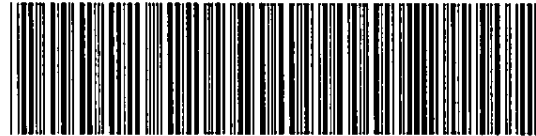
(Business Entity Name)

(Document Number)

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FILED  
2017 SEP - 5 PM 1:00  
TALLAHASSEE, FLORIDA

C. GOLDEN

SEP - 7 2017

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** **Change of Registered Agent**

Name of Corporation

**DOCUMENT NUMBER:**

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:

**Brintz DeHaven**

Name of Contact Person

**Homette Corporation**

Firm/Company

**1230 SW 10th Street**

Address

**Ocala, FL 34474**

City/State and Zip Code

**bdehaven@skylinecorp.com**

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

For further information concerning this matter, please call:

**Brintz DeHaven**

Name of Contact Person

at ( **574** ) **350 2083**

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 Indiana in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Homette Corporation
2. The principal office address: 1230 SW 10th Street, Ocala, FL 34474
3. The mailing address (if different): P.O. Box 743, Elkhart, IN 46515
4. Date of incorporation/qualification: 01/08/1964 Document number: 817595
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)

Mike Worden (resigned)

1230 SW 10th Street

Ocala, FL 34474

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

Ron Bland

1230 SW 10th Street

P.O. Box NOT acceptable

Ocala, FL 34474

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]  
Signature of an officer or director

Richard Florea

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.

[Signature]  
Signature of Registered Agent

8/16/2017

Date

If signing on behalf of an entity:

Homette Corporation

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  
2017 SEP - 5 PM 1:00  
TALLAHASSEE, FLORIDA