

A98000002927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

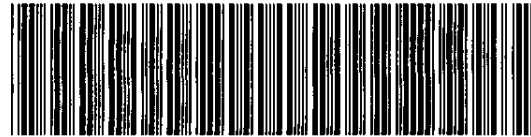
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/12/11--01012--023 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY 12 AM 10:00

N. Gulligan MAY 20 2011

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CONECA PROPERTIES, LTD.
Name of Corporation

DOCUMENT NUMBER: A98000002927

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 DUNLEAVY
Name of Contact Person

CONECA INC., AS GENERAL PARTNER
Firm/Company

5301 N FEDERAL HWY SUITE 380
Address

BOCA RATON, FL 33487
City/State and Zip Code

DMDUNLEAVY@CONECA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID DUNLEAVY at (954) 340-5594
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

1. The name of the corporation: COCECA PROPERTIES LTD.
2. The principal office address: 5301 N. FEDERAL HWY SUITE 380, BOCA RATON, FL 33487
3. The mailing address (if different): SAME AS PRINCIPAL
4. Date of incorporation/qualification: 12/31/1998 Document number: A98000002927
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)

DAM D DUNLEAVY

210 N UNIVERSITY DR SUITE 212

CORAL SPRINGS, FL 33071

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

DAM D DUNLEAVY

5301 N. FEDERAL HWY SUITE 380

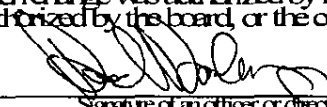
P.O. Box NOT acceptable

BOCA RATON, FL 33487

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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.

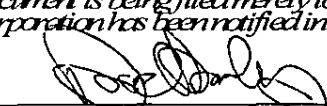


Signature of an officer or director

DAM D DUNLEAVY, 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.



Signature of Registered Agent

5/9/2011

Date

If signing on behalf of an entity:

DAM D DUNLEAVY

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