F08222

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
<u>, </u>
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Sertificates di Citates
Special Instructions to Filing Officer:

Office Use Only

R. WHITE

NOV 1 2 2019



600335814676

10/22/19--01012--002 **35.00

2019 00T 22 PH 4: 11

COVER LETTER

FO: Amendment Section Division of Corporations
SUBJECT: Dune Men Reaty the Name of Corporation
DOCUMENT NUMBER: F08222
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:
Beth Godwin Name of Contact Person
Dune Allen Realty Inc
5200 W. CauAty Hwy 30A
Santa Rosa Beach FL 32459 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Deth Godwin at (850) 267 2121 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

tursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tatement of change is submitted for a corporation organized under the laws of the State of FLOYICE	
in order to change its registered office or registered agent, or both, in the State of Florida.	
. The name of the corporation: Dune Allen Realty , Inc	
. The principal office address: 5200 W. County Hwy 30A	
Sarta Rosa Beach, FL 32459	
. The mailing address (if different):	
. Date of incorporation/qualification: 02 02 1981 Document number: F08222	
. 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)	
Brasseur, Many R VP	
, _	
Destin, FL 32541	
The name and street address of the new registered agent (if changed) and /or registered office (if changed):	:
-	
4477 legendary Drive, Suite 202 P.O. Box S)T acceptable	
Desho, FL 32541	
the street address of its registered office and the street address of the business office of its registered agent, s changed will be identical.	
uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.	
Van Seth Holing Sara Beth Godwing President	
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete further agree of my duties, and I am familiar with and accept the obligation of my position as registered gent. Or, if this document is being filed merely to reflect a change in the registered office address, I ereby confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agent Date Date	
signifig on behalf of an entity: DAVIO B. PLEAT	
Typed or Printed Name	

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