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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone : (850)878-5368 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE 1331 HALF STREET CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

	COVER 1	LETTER	
TO: Amenda Division	ment Section n of Corporations		
SUBJECT:	1 Half Street Corporation		
	Name of C	orporation	
DOCUMENT I	NUMBER: F11000001309		
The enclosed St	natement of Change of Registered Office	c/Agent and fe	ee are submitted for filing.
Please return all	l correspondence concerning this matte	r to the followi	ing:
	William Weber		
	Name of Co	niact Person	
	1331 Half Street Corporation		•
	Firm/Co	ompany	
	6111 Davenport Terrace		
• ;	Add	ress	
	Bethesda, MD - 20817		
	City/State as	nd Zip Code	
ing the second	weberwhiteine@man.com		
•	E-mail address: (to be used for f	uture annual :	report notification)
		<u>.</u>	
For further info	emation concerning this matter, please	call:	
William Weber	•	301	229-1996 2 239-598-3612
	Name of Contact Person		ode & Daytime Telephone Number
Enclosed is a \$	35.00 check made payable to the Depar	tment of State.	
	Mailing Address: Amendment Section	Am	et Address: endment Section
•	Division of Corporations P.O. Box 6327		rision of Corporations Ron Building
	Tallahassee, FL 32314	266 Tali	I Executive Center Circle lahassee, FL 32301
	Section 2002 to 12 20 March 12 Co.	14 # 1 · ·	The Market Co.
CRZE045 (03/12)	Marine Committee and Committee and		
		prove sugar	in the experience

FL006 - 05/20/2013 Webers Elever Cerlina

apply and committee.

STATEMENT OF C	Hange of registerei 		RED AGENT OR
statement of change is subm	f sections 607.0502, 617.0502 itted for a corporation organi	7, 607.1508, or 617.1508, Fl ized under the laws of the Sta	te of Delaware
_	its registered office or registe	•	te of Florida.
	on: 1331 Half Street Corporation		
2. The principal office addre	SS: 15307 BURNABY DR NAI	PLES, FL 34110	
3. The mailing address (if di	fferent):		
4. Date of incorporation/qua	dification: 03/23/2011	Document mumber: F1	1000001309
5. The name and street addr	ess of the current registered a ate: (If resigned, enter resigne	gent and registered office on	
William We	pet		
15307 BUR	NABY DR NAPLES, FL 34110	0	
(if changed):	ess of the new registered agentation System	nt (if changed) and /or registe	red office
c/o C T Co	rporation System, 1200 South Pi	ine Island Road	
	P.O. Box NOT	ecceptable	
Plantation,	Florida 33324		
The street address of its reas changed will be identical	pistered office and the street :	address of the business offic	e of its registered agent
Such change was authorized authorized by the board, or	d by resolution duly adopted the corporation has been not		
Signature of an officer		PHILLES OF TYPES THEM	e and time
I hereby accept the appoint I further agree to compty we performance of my dulies, agent. Or, if this documen hereby confirm that the con-	tment as registered agent and with the provisions of all statu and I am familiar with and a t is being filed merely to refle poration has been notified is	d agree to act in this capacit des relative to the proper ar ocept the obligation of my sct a change in the registere n writing of this change.	ly, ad complete osition as registered d office address, I
By: C Corporation Sys	tered Agent	10/16/19	3
If signing on behalf of an e	ntity:		-
DANIJEA I	SYLKS Name		

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

* * * FILING FEE: \$35.90 * * *

CR2E045 (03/12)