F14000002930

| equestor's Name) | | | |
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| ldress) | | | |
| ldress) | | | |
| ty/State/Zip/Phone | e #) | | |
| ☐ WAIT | MAIL | | |
| isiness Entity Nar | ne) | | |
| (Document Number) | | | |
| _ Certificates | s of Status | | |
| Special Instructions to Filing Officer. | | | |
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| | dress) ty/State/Zip/Phone WAIT siness Entity Nar cument Number) Certificates | | |

Office Use Only



07/31/15--01028--005 **35.00

15 JUL 31 AM 8: 37

SECRETARY OF STATE

AUG 4 2015 CLEWIS

COVER LETTER

Amendment Section
Division of Corporations

TY:

SUBJECT ASK Real Estate Corporation

Name of Corporation

DOCUMENT NUMBER: F14000002920

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filling. Please return all correspondence concerning this matter to the following:

Ana Marshall

Name of Contact Person

ASK Real Estate Corporation

Tirm/Company

331 Princeton Or

Acid Cas

Lake Worth, FI 33460

City/State and 7 in Code

anamarshall3407@comcast.net

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

For further information concerning this matter, please call:

Ana Marshall

a 561 719-5550

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed in a \$35.00 phech made payable to the Department of State.

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

| statement of cha | nnge is submitted for a corporation | 517.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of Nevada r registered agent, or both, in the State of Florida. | | |
|--|--|---|-----------|-------------------|
| <u> </u> | the corporation: ASK Real Es | | | |
| 2. The principal | office address: 331 Princetor | | | |
| 3. The mailing a | address (if different): | | | |
| 4. Date of incor | poration/qualification: June 18 | 3, 2014 | | |
| | d street address of the current registrement of State: (If resigned, enter | stered agent and registered office on file with the resigned) | | |
| | BUSINESS FILINGS IN | CORPORATED | | ŋ |
| | 1200 South Pine Island | Road | <u>15</u> | NISI |
| | Plantation, FL 33324 | | 15 JUL 31 | DIVISI B OF CARPE |
| 6. The name and (if changed): | d street address of the new register | red agent (if changed) and /or registered office | AM 8: | |
| | Marta Edwards | | 37 | |
| | 331 Princeton Dr | | | |
| | Lake Worth, FI 33460 | Box NOT acceptable | | |
| The street addr as changed will | ess of its registered office and the be identical. | e street address of the business office of its registered | agent, | |
| Such change wanthorized by t | as authorized by resolution duly a he board, or the corporation has b | adopted by its board of directors or by an officer so been notified in writing of the change. | | |
| Signati | ire of an officer or director | Ana Marshall, Manager Printed or typed name and title | | |
| I hereby accept I further agree performance of agent. Or, if th hereby confirm | the appointment as registered as to comply with the provisions of my duties, and I am familiar with is document is being filed merely that the corporation has been no | gent and agree to act in this capacity. all statutes relative to the proper and complete h and accept the obligation of my position as register, to reflect a change in the registered office address, I otified in writing of this change. | ed | |
| Acs | how & | 7/25/15 | | |
| | mature of Registered Agent | , Date | | |
| т | yped or Printed Name | - | | |

MAKE CHECKS PAYABLE TO FLORIDA DEFAULTATION OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TAILLAHASSEE, FL 32314
CH2E045 (02.12)

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