F16000003840

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE AND STATE OF STATE O

RAChang

COVER LETTER

Amendment Section

TO:

Division of Corporations		
Furaka Paalty Partners Inc		
SUBJECT: Eureka Realty Partners, Inc. Name of Corporation		
rane of corporation		
DOCUMENT NUMBER: F16000003840		
The enclosed Statement of Change of Registered Of	flice/Agent and fee are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Darlene Martin		
Name of Contact Person		
Eureka Realty Partners, Inc.		
Firm/Company		
4100 MacArthur Blvd., Suite 100		
Address		
Newport Beach, CA 92660		
City/State and Zip Code		
dmartin@craigrealtygroup.com	1	
E-mail address: (to be used for future annual rep	port notification)	
For further information concerning this matter, pleas	se call:	ī
F	• •	N 112
Darlene Martin	at (949)224-4157 Area Code & Daytime Telephone N	
Name of Contact Person	Area Code & Daytime Telephone N	
		1 (f) (m,1)
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	<u>್</u> ಗ್ರಾ
Division of Corporations	Division of Corporations	υž
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chi	nange is submitted for a corporation orga	102, 607.1508, or 617.1508, Florida Statutes, this mized under the laws of the State of California stered agent, or both, in the State of Florida.	
	f the corporation: Eureka Realty Partner	<u> </u>	
2. The principal Englewood, FL	al office address: 7241 Deegan Street		-
3. The mailing a	address (if different):		-
_	rporation/qualification: 9/27/1995		_
5. The name and Florida Depa	nd street address of the current registered artment of State: (If resigned, enter resign	agent and registered office on file with the ned)	
	Robin Hardy		
	7241 Deegan Street		
	Englewood, FL 34224		
6. The name and (if changed):	id street address of the new registered age	ent (if changed) and /or registered office	
	Paracorp Incorporated		
	155 Office Plaza Drive, 1st Floor		.) .)
	x NOT acceptable .	د :	
	Tallahassee, FL 32301		;
The street addre	ess of its registered office and the street I be identical.	address of the business office of its registered agent,	<u>.</u>
Such change was authorized by th	as authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or by an officer so tified in writing of the change.	
A		Deborah Siegel, Secretary	
=	are of an officer or director	Printed or typed name and title	
hereby accept further agree t of my duties, an document is beil corporation has	the appointment as registered agent an to comply with the provisions of all stat ad I am familiar with and accept the obl ing filed merely to reflect a change in th s been notified in writing of this change	nd agree to act in this capacity. utes relative to the proper and complete performance igation of my position as registered agent. Or, if this ie registered office address, I hereby confirm that the	2
	(Dit	4/22/2020	
Sign	mature of Registered Agent	Date	
f signing on bel	chalf of an entity:		
JODY MOUA,	, ASSISTANT SECRETARY		
	yped 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 (04/13)