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TO: Amendment Section Division of Corporations

SUBJECT: Brooke Properties; inc.
Name of Corporation

DOCUMENT NUMBER: F 1800 000 52 98

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:

Steven Hering

Name of Contact Person

Concord Property Management LLC

Firm/Company

728 SW 4th Street #1

Address

Fort Lauderdale, FL 33312

City/State and Zip Code

stevencprop@gmail.com

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

For further information concerning this matter, please call:

Steven Hering

954

483-9883

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

statement of che	provisions of sections 607.050 unge is submitted for a corpore	ution organized und	er the laws	of the State of <u>F</u>	-lorida	<u>.</u>
	r to change its registered offic the corporation: <u>Broov</u>	e Properti	ies, ia	<u>c</u>		
2. The principal 436	_	Elmhurst	Dr	Madison	Height	s, MI
3. The mailing a	address (if different):					
4. Date of incor	poration/qualification:	Do	eument nu	ımber: <u>F18</u>	200 00	5298
	d street address of the current r rtment of State: (If resigned, er		registered	office on file wi	th the	
	Jeffrey B. Smith, ES	Q.				:
	1401 East Broward I	3lvd. Suite 206	ô		شف	
	Fort Lauderdale, FL	33301		(P) (A) (T) (T) (T) (T) (T) (T) (T) (T) (T) (T		
6. The name and (if changed):	d street address of the new regi	istered agent (if char	iged) and /	or registered of		fi ,
	1401 East Broward	Blvd. Suite 300	<u> </u>	्र स्ट		C
	Fort Lauderdale, FL	33301 2.0. Box NOT acceptable		12	2	
The street addreas changed will	ess of its registered office and be identical.	the street address of	of the busin	ness office of its	registered	l agent,
Such change wa authorized by the	as authorized by resolution du ne board, or the corporation ha	ly adopted by its boas been notified in v	oard of dire writing of t	ectors or by an c the change.	officer so	
Signation	to of an officer or director	Steve		ng, Property		jer_
I further agree in performance of agent. Or, if the	the appointment as registered to comply with the provisions my duties, and I am familiar is document is being filed mental the corporation has been	of all statutes relat with and accept the rely to reflect a char	ive to the problems obligation	proper and comp of my position registered office	as register	ved I
Sig	nature of Registered Agent			Date		
If signing on be	half of an entity:					
T	yped or Printed Name					

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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