

3/19/2021

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

F210001119833

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (614)280-3338

Fax Number : (954)208-0845

**\*\*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

SARAH REALTY CORP.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

O SIMMONS

MAR 22 2021

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of PA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SARAH REALTY CORP.
2. The principal office address: 1119 VON PHISTER ST., KEY WEST, FL 33040
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/03/2021 Document number: F21000000695
5. 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)  
SUSAN M CARDENAS  
221 SIMONTON ST.  
KEY WEST, FL 33040
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
C T Corporation System  
1200 South Pine Island Road  
Plantation, Florida 33324  
P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

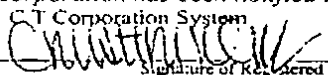
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
 Signature of an officer or director

Kenneth R. Silverman, Director

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By:  Christine Keim  
 Signature of Registered Agent Assistant Secretary 3/18/2021

Date

If signing on behalf of an entity:

Christine Keim, Assistant Secretary

Typed 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)