

K09771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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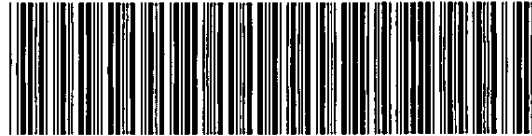
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Saray Incorporated
Name of Corporation

DOCUMENT NUMBER: K09771

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:

Robert G. Melsom

Name of Contact Person

Assest Receivership Group LLC

Firm/Company

1100 16th Street North

Address

St. Petersburg, Fl. 33705

City/State and Zip Code

rmelsom@assetreceivershipgroup.com

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

For further information concerning this matter, please call:

Robert G. Melsom at **727 504-6789**
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

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TALLAHASSEE, FLORIDA

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Saray Incorporated
2. The principal office address: 200 South Orange Avenue, Sarasota, FI 34236
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/29/1987 Document number: K09771

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)

M. Lewis Hall, III, Receiver

200 S. Orange Avenue

Sarasota, FI 34236

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Robert G. Melsom, Receiver

1100 16th Street North

P.O. Box NOT acceptable

St. Petersburg, FI 33705

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.

M. Lewis Hall, III
Signature of an officer or director

M. Lewis Hall, III, Receiver

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.

M. Lewis Hall, III
Signature of Registered Agent

12/23/2016
Date

If signing on behalf of an entity:

M. Lewsi Hall, III, Receiver

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 (03/12)

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TALLAHASSEE, FLORIDA