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Division of Corporations

Fax Number : (850)617-6380

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Account Name : C T CORPORATION SYSTEM

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REGISTERED AGENT CHANGE FIRST NETWORK REALTY, INC.

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5/24/2016 11:48:10 AM From: To: 8506176380(2/5)

5/23/2018 4:30:16 PM PAGE 1/001 850-617-6381



May 23, 2016

FLORIDA DEPARTMENT OF STATE Division of Corporations

FIRST NETWORK REALTY, INC. 4190 BELFORT RD. STE. 475 JACKSONVILLE, FL 32216US

SUBJECT: FIRST NETWORK REALTY, INC.

REF: K72602

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist III FAX Aud. #: H16000125642 Letter Number: 616A00010870

date of \$1000 to 5120

Fax Server

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Ame Divi	endment Section sion of Corporations	
SUBJECT:	First Network Realty, Inc	¢.•
SODUECI.	Name of C	Corporation
DOCUMEN	K72602	
The enclosed	Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.
	all correspondence concerning this matte	_
	Attn: Legal	
	Name of Co	ontact Person
	HomeServices of America, Inc.	
	Firm/C	ompany
	333 South 7th Street, FL 27	
	Add	dress
	Minneapolis, MN 55402	
	City/State a	nd Zip Code
	legal@homeservices.com	
	E-mail address: (to be used for	future annual report notification)
For further in	nformation concerning this matter, please	call:
Bryn Olsen	•	612 336-5446 at ()
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a	\$35.00 check made payable to the Depar	tment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
		Tallahassee, FL 32301

CR2E045 (03/12)

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 FL
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: First Network Realty, Inc
2. The principal office address: 4190 Belfort Road, Suite 475, Jacksonville, FL 32216
3. The mailing address (if different): c/o HomeServices of America, Attn: Legal, 333 South 7th Street, FL 27, Minneapolis, MN 55402
4. Date of incorporation/qualification: 03/09/1989 Document number: K72602
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)
F&L Corp
One Independent Dr., Ste. 1300
Jacksonville, FL 32202
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
P.O. Box NOT acceptable
Plantation, Florida 33324
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.
Michael T. Browne, Secretary
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: CT Corporation System Clark Myerr - 05/20/2016
Signature of Registered Agent Date
If signing on behalf of an entity:
Cristie Myers, Asst. Secretary Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

" " FILING FEE: 335.00 " " "

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)