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	945	ARD OSTERE SPRING RD. MANOR, NY		#	



Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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<u>NEW FILINGS</u>	AMENDMENTS			
 Profit Not for Profit Limited Liability Domestication Other 	 Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger 			
OTHER FILINGS	REGISTRATION/QUALIFICATION			
 Annual Report Fictitious Name 	 Foreign Limited Partnership Reinstatement Trademark Other V. SHEPARD JUN 1 2000 			
D0D011/7/07	Examiner's Initials			

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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

CALYPSO PROPERTIES, INC. 1. The name of the corporation :

2. The mailing address of the corporation : ______ c/o Richard Osterer

945 Spring Road, Pelham Manor, NY 10803-2714

3. Date of incorporation/qualification: <u>May 9, 1989</u> Document number:

4. The name and address of the current registered agent and registered office:

Sally S. Rockrise

3175 South Congress

Palm Springs, FL 33461

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

Daniel P. Cupp Sr.

9105 SE Morning Street

Hobe Sound, FL 33455-4439

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.

(Signature of an officer, chairman or vice chairman of the board)

5/3/2000

K866@

Richard Osterer, President (Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

· 2000 (Date)

If signing on behalf of an entity:

(Typed or Printed Name)

* FILING FEE: \$35.00 * * *

CR2E045(8/99)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314