

L10000050318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700273034227

05/19/15--01001--017 **25.00

15 MAY 19 PM 3:51

STATE OF CALIFORNIA
DIVISION OF REVENUE

MAY 26 2015
C LEWIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RealEstateAuctions.com LLC / Bankreas.Com LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office/Change and fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following:

Carl Blackstone

(Name of Person)

RealEstateAuctions.com, LLC

(Firm/Company)

10749 Mystic Circle Apt 201

(Address)

Orlando, FL 32836

(City/State and Zip Code)

For further information concerning this matter, please call:

Carl Blackstone

(Name of Person)

at (407) 488 3064

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: BANKREOS.COM, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 5-10-2010 Date of filing/registration in Florida

4. L10000050318 Document number

5. (a) LINDA GAYLE LEE
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
519 NW 60TH ST SUITE A
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

GAINESVILLE, FL 32607

(b) CARL A. BLACKSTONE
Enter name of NEW Registered Agent and/or NEW Registered Office address:

10749 MYSTIC CIRCLE

NEW Registered Office Address:

APT 201

ORLANDO, FL 32836

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Brian Kuzdas, CEO

Printed name of signer

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 further will and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. for in this document is being filed to merely reflect a change in the registered office address of the limited liability company.

Signature of Registered Agent

15 MAY 19 PM 3:51