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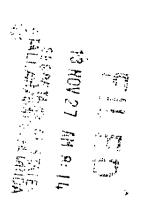
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November 18, 2013

JANET D. POTEAU 9717 HEATHERSTONE RIVER CT UNIT 4 ESTERO, FL 33928

SUBJECT: ACCELERATE REAL ESTATE & PROPERTY MANAGEMENT,

PLLC

Ref. Number: L12000144239

We have received your document for ACCELERATE REAL ESTATE & PROPERTY MANAGEMENT, PLLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 813A00026599

COVER LETTER

Division of Corporations
SUBJECT: Accelerate Real Estate & Property Manage ment PLLO Name of Corporation
DOCUMENT NUMBER: L12 000 144 239
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:
Name of Contact Person
Firm/Company
9717 Herthaustone River CT Unit 4
9717 Heatherstone River CT Unit 4 Address
Estara FL 33928
City/State and Zip Code
City/State and Zip Code City/State and Zip Code City/State and Zip Code Remail address: (to be used for future annual report notification)
Con Green so takey
For further information concerning this matter, please call:
Janet Poteca Member (5.1e) at (239) 322 6220 Name of Contact Person Area Code & Daytime Telephone Number
Junes (Junes Description at (July) J22 4225

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

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

ageni, or voin, in the state of rioriaa.	
1. Name of the limited liability company: Accelera	h Red Estate & Property Mongement
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	Ester. FL 33928
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	9717 Heathastone River Court #4 Estero FL 33928
11/14/2012	212000144239
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	United States Corporation Agents Ine
Registered Office Address:	Juite A Jabine DAKS Court Tampe FL 33612
(b) Enter name of NEW Registered Agent and/or NE	•
<u>NEW</u> Registered Agent:	Ignet D Potenu
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	9717 Heatherstout River Court Unit 4 Estoro FL 33908
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office stical. Or, in the case of a Florida limited with the case of a florida l
Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my per Chapter 608, F.S. Or, if this document is being filed to me address. I hereby confirm that the limited liability comparations of Registered Agent	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office my has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)