

# M 14723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

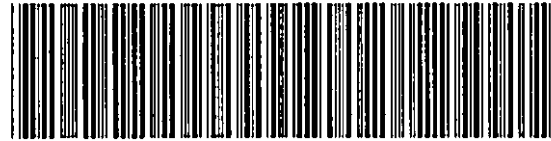
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300338297523

12/23/19--01034--001 \*\*35.00

FILED  
2019 DEC 23 PM 4:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RALCH 8

JAN 27 2020  
I ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CTB DEVELOPMENT CO., INC.  
Name of Corporation

**DOCUMENT NUMBER:** M14723

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:

Stephanie Luxton

Name of Contact Person

Crystal Family Office

Firm/Company

1111 Kane Concourse, Suite 404

Address

Bay Harbor Islands, FL 33154

City/State and Zip Code

sluxton@crystalfamilyoffice.com

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

For further information concerning this matter, please call:

Stephanie Luxton

Name of Contact Person

at (305) 868.1500

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

**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: CTB DEVELOPMENT CO., INC.
2. The principal office address: 1111 Kane Concourse Suite 404, Bay Harbor Islands, FL 33154
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 04/30/1985 Document number: M14723
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)

Nicole Dandridge

1111 KANE CONCOURSE SUITE 404 BAY HARBOR ISLANDS, FL 33154

RESIGNED

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

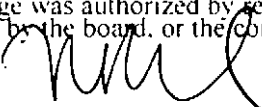
Stephanie Luxton

1111 KANE CONCOURSE SUITE 404 BAY HARBOR ISLANDS, FL 33154

P.O. Box NOT acceptable

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.

  
Signature of an officer or director

NATALIE BROD DIRECTOR  
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.*

  
Signature of Registered Agent

12/17/2019  
Date

If signing on behalf of an entity:

STEPHANIE LUXTON  
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 (04/13)

FILED  
2019 DEC 23 PM 4:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA