M02000001276

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Preserving Rural Property Values, Inc Name of Corporation DOCUMENT NUMBER: N02000001276 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: Larry N. Smith, MD Name of Contact Person PRPV Firm/Company 21120 NW 132nd Lane Address High Springs, Florida 32643 City/State and Zip Code Ins1@msn.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Larry N. Smith, MD 352 339-5161
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 6 unge is submitted for a corporation	organized under the law	ws of the State of Flo	orida	
	r to change its registered office or	•	h, in the State of Flo	rida.	
	the corporation: Preserving Rural F				
2. The principal	office address: 21120 NW 132nd L	ine 			
	High Springs, Florid	32643	····		
3. The mailing a	ddress (if different): same	·			
4. Date of incor	poration/qualification: 12/11/2003	Document	number: <u>N02000001</u>	276	
	I street address of the current regis tment of State: (If resigned, enter		ed office on file with	the	
	Winstom Rushing			202 SE	
-	14435 NW US HWY 441 STE 40		ALL	2022 NOV 17 Seure	7
	ALACHUA, FL 32615			17	
6. The name and (if changed):	d street address of the new register	d agent (if changed) агк	در d /or registered office		§ 0
	Larry N. Smith, MD		'	H 96	
	21120 NW 132nd Lane				
		P.O. Box. NOT acceptable			
	High Springs, Florida 32643	<u> </u>			
The street address changed will	ess of its registered office and the be identical.	street address of the bu	siness office of its r	registered :	agent,
Such change via	as authorized by resolution duly a board, or the corporation has b	dopted by its board of ceen notified in writing of	firectors or by an of of the change.	ficer so	
		Larry N. Smith,			
I hereby accept I further agree of my duties, an document is bei	the appointment as registered as the appointment as registered as to comply with the provisions of a d I am familiar with and accept t ng filed merely to reflect a chang been notified in wraing of this c	ent and agree to act in ll statutes relative to th ne obligation of my pos e in the registered offic	ie proper ana compi	lete perfor agent. Or confirm th	mance if this at the
Last Kus		10/26/2022			
Sig	nature of Registered Agent		Date		
If signing on be	half of an entity:				
	/ LArry N. Smith, MD				
	yped or Printed Name				

* * * FILING FEE: \$35.00 * * *