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## **COVER LETTER**

Division of Corporations
SUBJECT: CR BROKENAGE, IUC (Name of Corporation)
DOCUMENT NUMBER: P 0 1 0 0 0 0 9 4 2 1 9
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:
ALFRED R. TWACH, JR (Name of Contact Person)
CR BROKERAGE, IN C (Firm/Company)
6257 LAKE OSPREY DRIVE (Address)
SANASOTA, FL 34240 (City/State and Zip Code)
For further information concerning this matter, please call:
ALFRED R. NeoACH, JR at (941) 309.8989  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:  Amendment Section  Street Address:  Amendment Section

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

## 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 FLORIOA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: TR BLOKERAGE, INC
2. The principal office address: 7712 WEERING WILLOW CIR
SALABOTA, FL 3424 1
3. The mailing address (if different):
4. Date of incorporation/qualification: 9 26/2001 Document number: po10000 94219
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
JACK S. COX
11450 SE DIXIE HIGHWAY, SUITE 104
HOBE SOUND, FL 33455 En B
6. The name and street address of the new registered agent (if changed) and /or registered office  ARE SOUND, FL 33455  SE S
A CILED 2-1) ACIL JU
6257 LAKE OSPREY DRIVE
SALASOTA, FL 34240
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)  ALFRED R. ROAELLJR PRESIDENT  (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)  8 2 1 200 9 (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

Make checks payable to Florida Department of State mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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