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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: Caribbean Mobile Home Estates, inc. Name of Corporation		
Name of Corporation		
DOCUMENT NUMBER: P02000011595		
The enclosed Statement of Change of Registered Of		
Please return all correspondence concerning this ma	tter to the following:	
Elizabeth J. Coviello, Esq.		
Name of Contact Person		
The Law Office of Elizabeth J Coviello, PA		
типисопірану		
6400 Madison Street		
Address		
New Port Richey, Florida 34652 City/State and Zip Code		
·		
coviclaw@gmail.com	<u>.</u>	
E-mail address: (to be used for future annual rep	port notification)	
For further information concerning this matter, please call:		
Elizabeth J. Coviello, Esq.	at (⁷²⁷) ⁷⁷⁷⁻³³³⁰ Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Dep	partment of State.	
Mailing Address: Amendment Section	Street Address:	
	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
Tananassee, T.E. SENT	Tallahassee, FL 32303	
CR2E045 (04/13)	· 7.	
* 17**		

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

statement of ch	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this conganized under the laws of the State of Florida registered agent, or both, in the State of Florida.
		Home Estates, inc.
	I office address: 11635 Turks Drive,	
3. The mailing	address (if different):	
4. Date of incom	rporation/qualification: 1-28-2022	Document number: P02000011595
	nd street address of the current regis artment of State: (If resigned, enter	stered agent and registered office on file with the resigned)
	The Law Office of Elizabeth J Cov	iello, PA
	11635 Turks Drive	
	New ¹ Port Richey, Florida 34654	
6. The name an (if changed):	~	ed agent (if changed) and /or registered office
	The Law Office of Elizabeth J Cov	iello, PA
	6400 Madison Street	
		P.O. Box NOT acceptable
	New Port Richey, Florida 34652	
The street addr as changed wil	ess of its registered office and the l be identical.	street address of the business office of its registered agent.
Such change wauthorized by t	as authorized by resolution duly a he board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.
Engan Klaff;	<u>, , , , , , , , , , , , , , , , , , , </u>	Eugene Kolaski, Director
Signati	ure of an officer or director	Printed or typed name and title
I Jurther agree of my duties, ai document is be	t the appointment as registered ag to comply with the provisions of a nd I am familiar with and accept to ing filed merely to reflect a chang is been notified in writing of this c	ent and agree to act in this capacity, all statutes relative to the proper and complete performance he obligation of my position as registered agent. Or, if this e in the registered office address, I hereby confirm that the hange.
	De la companya della companya della companya de la companya della	October 14, 2022
Sig	gnature of Registered Agent	Date
If signing on be	ehalf of an entity:	
The Law Office	of Elizabeth J Coviello, PA	
7	Typed or Printed Name	
	* * * FILIS	NG 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)