## P02000014084

(Requestor's Name)	<u> </u>
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PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of St	tatus
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Special Instructions to Filing Officer:	
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Office Use Only



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RA Change

Fee waised to correct 2011 AR accepted in error.

GB 8/2



## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Plant Copy Equity (Name of Cor	Ventures Real Estate Holdings Inc
DOCUMENT NUMBER: POJODDIYOS	84
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter t	o the following:
S. Acoste Name of Conta	act Person
Firm/Com  YLOUS Huy G  Address  City/State and	1 East 53566
E-mail address: (to be used for futi	ure annual report notification)
For further information concerning this matter, please cal	II:
Name of Contact Person  NC 47  Enclosed is a \$35.00 check made payable to the Departm	at () Area Code & Daytime Telephone Number
2. Increased is a 455.00 officer made payable to the Departin	on or orate.
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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Plant Cty Equit Verteres Real Estet Holdings
2. The principal office address: 10008 they 92 East  Plant Cdy FC 33566
3. The mailing address (if different):
4. Date of incorporation/qualification: Document number:
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)
Jongh, Pr 33 los
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):    Acade   P.O. Box NOT acceptable   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.  Significant of a cofficer or director  Printed or typed hand 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.
7-30-12
Signature of Registered Agent Date
If signing on behalf of an entity:

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

Typed or Printed Name