

PD20000129587

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(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
STATE OF MISSISSIPPI

FEB 13 2017
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Real Estate Consulting Group INC
Name of Corporation

DOCUMENT NUMBER: P02000129587

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:

JOHN TRACY

Name of Contact Person

THE REAL ESTATE CONSULTING GROUP INC
Firm/Company

P.O. Box 31972

Address

PA/M BEACH GARDENS FL 33420
City/State and Zip Code

JOHN@REC6FLA.COM

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

For further information concerning this matter, please call:

JOHN TRACY

Name of Contact Person

at (561) 632-6272

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: THE REAL ESTATE CONSULTING GROUP INC.
2. The principal office address: 112 LOST BRIDGE DRIVE PALM BEACH GARDENS FL 33410
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12-10-02 Document number: P02000129587
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)

JOHN TRACY
112 LOST BRIDGE DRIVE
PALM BEACH GARDENS FL 33410

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

PAXTON AND SMITH P.A.
1615 FORUM PLACE, STE 500
P.O. Box NOT acceptable
WEST PALM BEACH FL 33401

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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]
Signature of officer or director

JOHN TRACY
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]
Signature of Registered Agent

2/6/17
Date

If signing on behalf of an entity:

THOMAS B. MILLER
Typed or Printed Name

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