P03000034526

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filolie#)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Se Division of Cor	ction porations						
SUBJECT:		Realtors, Inc.					
	Name	or Corporation					
DOCUMENT NUMBI	ER:P	03000034526					
The enclosed Statement	of Change of Registered O	ffice/Agent and fee are subr	nitted for filing.				
Please return all corresp	ondence concerning this ma	atter to the following:					
•	-	· ·					
Robert B. Montgomery							
Robert B. Montgomery Name of Contact Person							
Montgomery Realtors, Inc.							
	Firm	/Company					
	3100-1 Woods Way						
Address							
	Gulf Bree	eze, FL 32563 e and Zip Code					
City/State and Zip Code							
sandy@montgomeryrealtors.com							
E-mail address: (to be used for future annual report notification)							
For further information	concerning this matter, plea	se call:					
Sa	ndy Merritt	at (850-)	932-9228				
	Contact Person	at \	time Telephone Number				
Enclosed is a \$35.00 che	eck made payable to the Dep	partment of State.					
	Mailing Address: Amendment Section	Street Addres Amendment	SS:				
	Division of Corporations						

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	nnge is submitted for a c	orporation organize	607.1508, or 617.1508, Flored under the laws of the State d agent, or both, in the State	of Flori	ida		
1. The name of	the corporation: Mont	gomery Realto	ors, Inc.				
2. The principal	office address: 3100-	l Woods Way					
Gulf Breez	ze, FL 32563						
3. The mailing a	address (if different):			 			
4. Date of incorporation/qualification: 03/28/2003 Document number: P					P03000034526		
	I street address of the cu tment of State: (If resign	ned, enter resigned)	nt and registered office on fil	e with the	;		
	1388 Country Clul	. Dd					
	Gulf Breeze, FL 32	2563			12 JAN SEGRET		
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office						
	3100-1 Woods Wa		3 m				
	Gulf Breeze, FL 32		11				
	ess of its registered offi be identical.	ce and the street ad	dress of the business office			ı	
Such change was authorized by the	as authorized by resolution board, or the corporation of the corporati	tion duly adopted b tion has been notif	y its board of directors or be ied in writing of the change	y an offic	er so		
Signatur	recording of director	ley.	President, Robert E	3 Montg	omery		
I further agree to of my duties, an	to comply with the prov d I am familiar with an	visions of all statute ad accept the obliga	agree to act in this capacity is relative to the proper and ation of my position as regis registered office address, I h	l complete stered age	ent. Or. if thi	S	
Toler of	nature of Registered Agent	4 -	1/12/12 Date	2			
If signing on be	half of an entity:	J					
	yped or Printed Name						

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