P03 0000 55396

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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06/05/20--01012--028 **35.00

2020 JUH-5 PH 1: 50

O SIMINO : 1020

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Update address of Registered Agent Name of Corporation	
DOCUMENT NUMBER: P03000055396	
The enclosed Statement of Change of Registered G	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Robert Cuccinello	
Name of Contact Person	
HOMES AND LAND BROKERS INC	
Firm/Company	
4851 TAMIAMI TRAIL N SUITE 200	
Address	
NAPLES, FL 34103	
City/State and Zip Code	
ROB@HLBROKERS.COM	
E-mail address: (to be used for future annual r	report notification)
For further information concerning this matter, ple	ease call:
Robert Cuccinello	at (239) 598-9200 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the D	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of change is submitted for a corporati	, 617,0502, 607,1508, or 617,1508, Florida Statutes, t ion organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.	his
1. The name of the corporation: HOMES AND I		
2. The principal office address: 4851 TAMIAMI	TRAIL N SUITE 200	
•		
	Document number: P03000055396	
	gistered agent and registered office on file with the	~
ROBERT CUCCINELLO		<u>1</u> 02û
3606 ENTERPRISE AVE SUIT	E 200	2026 JUH
NAPLES, FL 34104		<u>ئ</u> 1
6. The name and street address of the new regist (if changed):	tered agent (if changed) and /or registered office	PH 1: 5
ROBERT CUCCINELLO		. 0
4851 TAMIAMI TRAIL N SUI	TE 200	
NAPLES, FL 34103	P () Box NOT acceptable	
The street address of its registered office and t as changed will be identical.	he street address of the business office of its register	red agen
Such change was authorized by resolution dul authorized by the board, or the corporation has	y adopted by its board of directors or by an officer s s been notified in writing of the change.	o
1	Robert Cuccinello	
I hereby accept the appointment as registered I hereby accept the appointment as registered I further agree to comply with the provisions of my duties, and I-apr familiar with and accept document is being filed merely to reflect a cha corporation has been notified in writing of this	Printed or typed name and title agent and agree to act in this capacity, of all statutes relative to the proper and complete pe, of the obligation of my position as registered agent, inge in the registered office address, I hereby confirs of 1	rformand Or, if th m that th
Signature of Registered Agent	6/1/2020 Date	
If signing on behalf of an entity:		
Robert Cuccinello		
Typed or Printed Name	LING 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)

