## P03000091892

(Re	questor's Name)	•
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(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Florida Real Estate Outlet, Inc. (Name of Corpor	ation)	
DOCUMENT NUMBER: P03000091892	<u></u>	
The enclosed Statement of Change of Registered Office/Age	ent and fee are submitted for filing.	
Please return all correspondence concerning this matter to th		
rease return an correspondence concerning and matter to an	e tonowing.	
Judy Benoit		
(Name of Contact	Person)	
Florida Real Estate Outlet, Inc.		
(Firm/Compar	19)	
4850 SE 140th. Street		
(Address)		
Summerfield, Fl. 34491		
(City/State and Zip	Code)	
For further information concerning this matter, please call:		
Douglas Sturek at	( 352 ) 362-7983	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department	of State.	
Mailing Address:	Street Address:	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
Tallallassee, FL 32314	Tallahassee, FL 32301	

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rto change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Florida Real Estate Outlet, Inc.
	office address: 623 SE 30th. Ave., Ocala, Fl. 34474
3. The mailing a	ddress (if different): N/A
4. Date of incorp	poration/qualification: 08/19/2003 Document number: P03000091892
	I street address of the current registered agent and registered office on file with the trment of State:
	Douglas Sturek
	623 SE 30th. Ave.
	Ocala, Fl. 34471
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office TO
	Judy Benoit 27 5
	4850 SE 140th. Street
	(P.O. Box NOT acceptable)
	Summerfield, Fl. 34491
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
(Signatu	Douglas Sturek (President)  (Printed or typed name and title)
	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Judy	Benoit 4/2/08
If signing on bel	half of an entity:
(T	yped or Printed Name)

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