P0400039834

(F	Requestor's Name)			
4)	Address)			
(<i>F</i>	Address)			
(C	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(E	Business Entity Name)			
(Document Number)				
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C. GOLDEN

110 1 0 2018

COVER LETTER

Division of Corporations					
SUBJECT: Mahoney Homes, Inc.					
Name of Corporation					
DOCUMENT NUMBER: P0400039834					
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:					
Leah Mahoney					
Name of Contact Person					
Mahoney Homes, Inc.					
Firm/Company					
2100 SW 35th Ave.					
Address					
Delray Beach, FL 33445					
City/State and Zip Code					
LSMahoney@bellsouth.net					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Corinne Liebl at (561) 251-8187 Name of Contact Person Area Code & Daytime Telephone Number					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address: Amendment Street Address:					
Amendment Section Amendment Section Division of Corporations Division of Corporations					
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle 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 Sta ange is submitted for a corporation organized under the laws of the State of Flo er to change its registered office or registered agent, or both, in the State of Flo	orida	this	
1. The name of	the corporation: Mahoney Homes, Inc.			
2. The principal	office address: 2100 SW 35th Ave., Delray Beach, FL 33445			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: March 2, 2004 Document number: P04000	0398	834	
	d street address of the current registered agent and registered office on file with attment of State: (If resigned, enter resigned)	the		
	Daniel Mahoney			
	2100 SW 35th Ave.	- - - 	2018 (
	Delray Beach, FL 33445		1018 DEC -5	
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):		. (<u>3</u> E S]	5 PH 1:	
	Corinne Liebl	AE AE	<u>5</u>	_
	3776 NW 8th St.			
	P.O Box NOT acceptable Delray Beach, FL 33445			
The street address changed will	ress of its registered office and the street address of the business office of its r I be identical.	egiste	ered a	gent,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change.	ficer s	30	
Signati	Leah Mahoney, Treasurer Printed or typed name and title	<u>r</u>		_
I further agree performance of	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and compl f my duties, and I am familiar with and accept the obligation of my position a nis document is being filed merely to reflect a change in the registered office of that the corporation has been notified in writing of this change.	lete is regi addre	isterec ss, 1	l
Sig	Spatture of Registered Agent Date			<u></u>
If signing on be	chalf of an entity:			
	Typed or Printed Name			

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