

P04000042914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

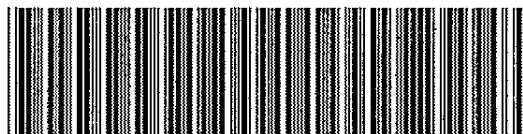
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Richard Hellenbrand
AUTHORIZATION BY PHONE TO
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to meet requirements
DOCUMENT



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09/07/06--01031--023 **35.00

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06 SEP - 7 PM 12:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ps 9/8/06
no

COVER LETTER

TO: Registration Section
— Division of Corporations

SUBJECT: Encore! Realty Services Inc.
(Name of Alien Business Organization)

Dear Sir or Madam:

The enclosed Statement of Change of Registered Agent/Registered Office for Alien Business Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard Hellenbrand
(Name of Person)

Encore! Realty Services Inc.
(Firm/Company)

1710 SW 53rd Lane
(Address)

Cape Coral, FL. 339014
(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Hellenbrand at (239) 542-4600
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certified Copy

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. Encore! Realty Services Inc.
(Name of corporation:)

2. 03/08/2004 3. P04000042914 4. 56-2457072
(Florida registration date) (Florida document number) (FEI Number, if applicable)

5. 4430 Orchid Blvd., Suite 201, Cape Coral, FL. 33904
(Principal office address)

6. Name and address of registered agent and office currently on record with this office:

Paula Hellenbrand
1511 SW 53rd Terrace
Cape Coral, FL. 33914

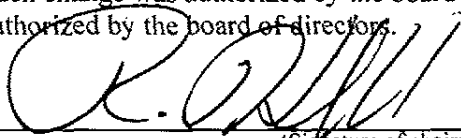
7. New registered agent and/or office address:

Paula Hellenbrand
1710 SW 53rd Lane
Cape Coral, FL. 33914

(Note: Registered office must be a Florida street address)

8. The street address of the registered office and the street address of the business office of the registered agent are identical.

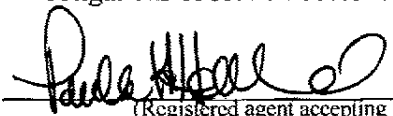
9. Such change was authorized by the board of directors or an officer of the corporation so authorized by the board of directors.

10. 
(Signature of chairman, vice chairman, or officer)

11. President / Director
(Name and capacity of person signing in number 10 above)

12. Signature of new registered agent, if applicable:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0502, Florida Statutes.


(Registered agent accepting appointment)

9/15/06
(Date)

FILING FEE: \$35.00

**Make checks payable to Florida Department of State and mail to:
Division of Corporations P. O. Box 6327 - Tallahassee, FL 32314**

FILED
06 SEP - 7 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA