P04000056280

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TALLAMASSEE FLORIDA

14 NOV -5 PM 3: 55

NOV 2 0 2014 T. CARTER

RA/RO Change

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: EXPLORE REALTY, INC.

Name of Corporation

DOCUMENT NUMBER:

P04000056280

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:

TERRI WEGMANN

Name of Contact Person

FULLER & ASSOCIATES

Firm/Company

2301 PARK AVENUE, SUITE 404

Address

ORANGE PARK, FL 32073

City/State and Zip Code

laura@grahamsells.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TERRI WEGMANN

.,904

264-0585

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	ange is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes organized under the laws of the State of FLORI registered agent, or both, in the State of Florida	DA	
1. The name of	the corporation: EXPLORE R	EALTY, INC.		-
	office address: 1680 SMITH S PARK, FLORIDA 32073	SIREET, SUITE 8		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 04/01/20	04 Document number: P0400056	3280	
	d street address of the current regist rtment of State: (If resigned, enter r	ered agent and registered office on file with the esigned)		
	RONALD L. MONROE			
	2826 RIVER OAK DRIVE	<u> </u>		
	ORANGE PARK, FLORI	DA 32073		<u>-</u> 1
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				SECRETA ALLAHA
	LAURA GRAHAM		14 NOV -5 1	SSE TE
	1680 SMITH STREET, S	SUITE 8	PH 3:	프랑 프랑
	P.O. BO	DA 32073	55	TATE
Α		street address of the business office of its regist		ent,
authorized by t	he board, or the corporation has be	dopted by its board of directors or by an officer en notified in writing of the change.	50	
LAURA GRAHAM, PRESIDENT Printed or typed name and title				
I hereby accept I further agree performance of agent. Or, if the hereby confirm	the appointment as registered age to comply with the provisions of al my duties, and I am familiar with is document is being filed merely t that the corporation has been note	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as reg to reflect a change in the registered office addr ified in writing of this change.	zistered ·ess, I	
Doma	Glan	11/3/14		_
1	chalf of an entity:	Date		
signing on or	man or an oning.			
7	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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