## P05000008/97

(Requestor's Name)
· · ·
(Address)
(Address)
•
(City/State/Zip/Phone #)
(6.13)-6.13.15.15.11
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Octanica copies
Special Instructions to Filing Officer:
•

100130102011

05/27/08--01008--002 \*\*35.00%

Office Use Only

& god

The State of the S

DOMO MAY 27 PM

## **COVER LETTER**

Something and the state of the control of the state of th

Division of Corporations .	
SUBJECT: REALESTATE-LINK.COM, INC.	
(Name of Corporation)	
DOCUMENT NUMBER: P05000008197	
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:	J
LYNNE FRANKOS (Name of Contact Person)	
REALESTATE-LINK.COM, INC. (Firm/Company)	
1035 S. SEMORAN BLVD. #1012 (Address)	
WINTER PARK, FL 32792	•
(City/State and Zip Code)	
For further information concerning this matter, please call:	
LYNNE FRANKOS at (407) (Name of Contact Person) (Area Code &	657-2640  Daytime Telephone Number)
Enclosed is a \$35.00 check made:payable to the Department of State:	Baytime retephone (vulnoci)
Division of Corporations P.O. Box 6327 Clifton B Tallahassee, FL 32314	ent Section of Corporations

TO: Amendment Section

## 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 r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: REALESTATE-LINK.COM, INC.
2. The principal	office address: 1035 S. SEMORAN BLVD. #1012 ARK, FL 32792
3. The mailing a	ddress (if different): SAME
4. Date of incorp	poration/qualification: 01/18/2005 Document number: P05000008197
	UNITED STATES CORPORATION AGENTS, INC.  13302 WINDING OAKS BLVD., SUITE A-100  TAMPA, FL 33612-3425
	13302 WINDING OAKS BLVD., SUITE A-100
	TAMPA, FL 33612-3425
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	ROBERT TARY KETTLE
	1035 S. SEMORAN BLVD. #1012  (P.O. Box NOT acceptable)
	WINTER PARK, FL 32792
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board for the corporation has been notified in writing of the change.
(Signati	Robert Tary Kettle, President (Printed or typed name and title)
	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 complete performance at I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merfly to reflect a change in the registered office address, I hereby confirm that the speen notified in writing of this change.
	MANUEL S/20/2008  (Date)
Koh	chalf of an entity:  It Tay Kettle  Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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