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T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: ARCE REALTY Idc. Name of Corporation		
DOCUMENT NUMBER: EIN 383722315		
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:		
Robert M. Arce Name of Contact Person Arce Realty Idc Firm/Company 15124 Appalousa Hills Dr. Address Date City, FL 33523 City/State and Zip Code Rmaca 20 hotmail.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Robert M. Area Code & Daytime Telephone Number Robert M. 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 change is submitted for a corporation organized under the laws of the State of $F! \supset C!O O \subset C!O \subset C$
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ARCE Realty INC.
2. The principal office address: 15124 RPPRIOUSA HILL DR.
DADE City, Fr 33523
3. The mailing address (if different): Same As Above
4. Date of incorporation/qualification: 5/15/2005 Document number: P050007061
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Rubert m Arce
2514 Rustic Ook DR.
_ Lvbz, FL 33559
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Robert m Arce
15124 Appalousa Hilly DR.
DADe City, FL 33523
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Mulh M Que Robert M. Arce Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Mus m Ora 04/10/2012
Signature of Registered Agent Date
If signing on behalf of an entity:
To the Pairs 133
Typed or Printed Name

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

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