

PO5000071292

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T. ROBERTS

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Sockman Real Estate Services, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P05000071292

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:

Frank L. Sockman

Name of Contact Person

Sockman Real Estate Services, Inc.

Firm/Company

194 Willow Oak Way

Address

Palm Coast, FL 32137

City/State and Zip Code

flspalmcoast@msn.com

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

For further information concerning this matter, please call:

Frank Sockman

Name of Contact Person

at ( 386 )

503-9363

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

