

P 0600025438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

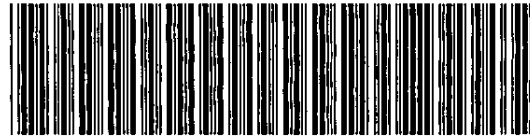
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R/A Chey  
SEP 19 2013

WRITE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 30, 2013

BETTI JEAN  
LOT AND BLOCK REALTY  
4399 SW 110TH ST  
OCALA, FL 34476

SUBJECT: LOT & BLOCK REALTY, INC.  
Ref. Number: P06000025438

We have received your document for LOT & BLOCK REALTY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

An officer/director must sign authorizing the change. The title owner is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II

Letter Number: 913A00018333

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13 SEP 12 AM 9:41  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 30, 2013

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Rebekah White  
Regulatory Specialist II

Letter Number: 913A00018333

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** **OFFICE ADDRESS CHANGE**

Name of Corporation

**DOCUMENT NUMBER:** **P06000025438**

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:

**BETTI JEAN**

Name of Contact Person

**LOT AND BLOCK REALTY**

Firm/Company

**4399 SW 110TH ST**

Address

**OCALA FL 34476**

City/State and Zip Code

**BETTIREALTOR@GMAIL.COM**

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

For further information concerning this matter, please call:

**BETTI JEAN**

Name of Contact Person

at ( **352** ) **484-1326**

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**

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. The name of the corporation: Lot and Block Realty, Inc.
2. The principal office address: 5818 SE Agnew Rd  
Bellevue FL 34420
3. The mailing address (if different): PO BOX 959 Bellevue FL 34421
4. Date of incorporation/qualification: 08/21/2006 Document number: PO6000025438
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)

Betti Jean  
1828 SE Hwy 484  
Ocala FL 34480

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

5818 SE Agnew Rd  
Bellevue FL 34420

P.O. Box NOT acceptable

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SEP 13 AM 10:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

[Signature]  
Signature of an officer or director

Betti Jean - President  
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.

[Signature]  
Signature of Registered Agent

9/9/13  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

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