# P06000046904

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### **COVER LETTER**

TO: Amendment Section Division of Corporations

# SUBJECT: CRT Properties, Inc.

(Name of Corporation)

## DOCUMENT NUMBER: P06000046904

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:

Susan Platt

(Name of Contact Person)

CRT Properties, Inc.

(Firm/Company)

P.O. Box 15887

(Address)

Tallahassee/Florida 32317

(City/State and Zip Code)

For further information concerning this matter, please call:

Susan Platt	at ( 850 ) 656-5475
(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

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CRT Properties, Inc.

2. The principal office address: 241 John Knox Road Suite 300, Tallahassee, Florida 32303

3. The mailing address (if different): P.O. Box 15887 Tallahassee, Florida 32317

4. Date of incorporation/qualification: Document number:

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

7733 Lonesome Dove Lane Tallahassee, Florida 32311 U	S	80	
		AUG	71
		12	(interest
		PH	
The name and street address of the new registered agent (if changed) and /or registered o (if changed):	ffice - or	မ္မ	U
6964 Azusa Road Tallahassee Florida, 32317		دع	<i>.</i> .

(P.O. Box NOT acceptable)

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.

ature of an officer or director)

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 of Registered 7

If signing on behalf of an entity:

)E R (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

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