

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<u> </u>
(Cit	ty/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

TO:	Amendment Section
	Division of Corporations

1P06000055452 DOCUMENT NUMBER:___ 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: BORAH K PAREDES
(Name of Contact Person) KENWOOD LN, STES9 For further information concerning this matter, please call: Name of Contact Person) at (239) 936-8338 (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 HORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: DEWOLFE REALTY, INC.
2. The principal office address: 12734 KENWOOD LN, STE 80, FORT MYERS, £ 33907
3. The mailing address (if different): 12734 KENWOOD LN, STE 80 FORT MYERS.
FL 33907
4. Date of incorporation/qualification: 4/18/2006 Document number: POG000055452
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
ROBERT D. ROYSTON, JR., ESQ. 500
P.O. DRAWER 60205
FORT MYERS, FL. 33906
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
THOMAS G. ECKERTY ESQ.
12734 KENWOOD LN, STE 89 (P.O. Box NOT acceptable)
FORT MYERS, FI_ 33907
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 of an officer of director) BERNARD J. DEWOLFE (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 of Registered Agent) MARCH 5, 2007 (Date)
If signing on behalf of an entity:
THOMAS G. ECKERTY (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 * * *