## POUDDO SWOOD

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(Ad	dress)	
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(Cit	y/State/Zip/Phone	<del>;</del> #)
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(Do	cument Number)	
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10/26/12--01018--001 \*\*35.00

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: LanOver Properties, Inc.  Name of Corporation		
DOCUMENT NUMBER: P0600086600		
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:		
Cheryl Phillips  Name of Contact Person		
LandOver Properties, Inc.		
P.O. Box 7144		
Address		
Pensacola FL 32534		
City/State and Zip Code		
deav011@yahoo.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Cheryl Phillips Name of Contact Person  at (850 ) 686-9997 Area Code & Daytime Telephone Number		
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  Street Address:  Amendment Section  Division of Corporations		

CANTOREN GENTRANDER OCH BALDROTTER SEE 1887–1847–1948 AUGUST DAGT

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (03/12)

P.O. Box 6327

Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of th	ne corporation: LandOver Properties, Inc.
2. The principal of	office address: 9511 Holsberry Lane Pensacola FL 32534
3. The mailing ad	Idress (if different): P.O. Box 7144 Pensacola FL 32534
4. Date of incorpo	oration/qualification: 6/20/2006 Document number: P06000086600
5. The name and	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
<u>(</u> _	Cheryl Phillips
<u>.</u>	5866 Ironwood Dr 🛪 👸
<u>_                                    </u>	Pace, FL 32534
6. The name and : (if changed):	Pace, FL 32534  Street address of the new registered agent (if changed) and /or registered office  Cheryl Phillips
<u>(</u>	Cheryl Phillips 29
•	9511 Holsberry Lane
_	P.O. Box NOT acceptable
<u> </u>	Pensacola FL 32534
The street addres as changed will b	s of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Ches	organ of director  Cheryl Phillips,  Printed or typed name and title
I hereby accept the surface of the surface of the performance of the surface of t	he appointment as registered agent and agree to act in this capacity, comply with the provisions of all statutes relative to the proper and complete by duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I had the corporation has been notified in writing of this change.
Cherry Sign	10/17/12  Rule of Registered Agent  Date
If signing on beha	alf of an entity:
Тур	ed or Printed Name

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