

P07000001593

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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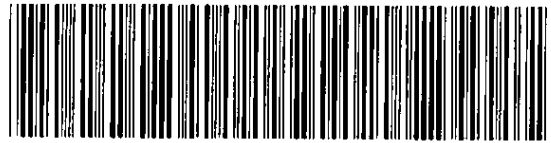
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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Thomas T. Cobb (1916-2004)
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August 26, 2024

VIA FEDERAL EXPRESS

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Gallery Homes of Deland, Inc. – Change of Registered Agent

Dear Sir/Madam:

Enclosed please find the cover letter, and the signed change of registered agent for Gallery Homes of Deland, Inc. Also enclosed is a check for fees in the amount of \$35.00.

If you have any questions, please call me directly at (386) 323-9246.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Nancy A. Prasse". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Nancy A. Prasse
Legal Assistant
Direct Dial (386) 323-9246
Email: Nancy.Prasse@CobbCole.com
Fax (386) 999-3310

Enclosures

JPF:nap

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GALLERY HOMES OF DELAND, INC.
Name of Corporation

DOCUMENT NUMBER: P07000001593

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:

JOHN P. FERGUSON, ESQUIRE

Name of Contact Person

COBB COLE

Firm/Company

ONE DAYTONA BLVD SUITE 600

Address

DAYTONA BEACH, FL 32114

City/State and Zip Code

nancy.prasse@cobbcole.com

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

For further information concerning this matter, please call:

NANCY PRASSE

Name of Contact Person

at (386) 323-9246

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: GALLERY HOMES OF DELAND, INC.
2. The principal office address: 446 W NEW YORK AVE
DELAND, FL 32720
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/21/2006 Document number: P07000001593
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)

ROBERT FITZSIMMONS

1597 MASTERPIECE WAY

DELAND, FL 32724

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

PALMETTO CHARTER SERVICES, INC.

ONE DAYTONA BLVD., SUITE 600

P.O. Box NOT acceptable

DAYTONA BEACH, FL 32114

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.

Signed by:

Robert Fitzsimmons

Signature of an officer or director
C8530659-54DAF2

ROBERT FITZSIMMONS, CEO

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.

DocuSigned by:

John Ferguson

Signature of Registered Agent

8/26/2024

Date

If signing on behalf of an entity:

John Ferguson

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 (04/13)

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE