P07000079057

(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	☐ WAIT	MAIL.
(Bı	usiness Entity Nar	me)
(Do	ocument Number)	<u> </u>
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SECRETARY OF STATE
SECRETARY OF STATE
AHASSEE, FLORIDA

RD Change Heuris 8-11-10

COVER LETTER

Amendment Section

TO:

Division of Corporations			
SUBJECT: A Special Really Inc. Name of Corporation			
DOCUMENT NUMBER: P070000 79057			
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:			
Meda Taylor Name of Contact Person			
A Special Realty Inc.			
2825 Lewis Speedway St. 101 Address			
St. Augustine 71. 32084 City/State and Zip Code			
<u>Loulene</u> <u>affordable</u> Staugustine. Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Meda Taylor at (Go4) 669-7876 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 Division of Corporations			
P.O. Box 6327 Clifton Building			

Tallahassee, FL 32314

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
1. The name of the corporation: A Special Realty Trc. 2. The principal office address: 2825 Lewis Speedary Ste 101 St Augusting II. 32084
3. The mailing address (if different):
4. Date of incorporation/qualification: 8/09/2007 Document number: 40700079057
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) Neda D Taylor. 1191 Old Moultrie Rd Stell B St Augustine 71. 32084 6. The name and street address of the new registered agent (if changed) and /or registered office on file with the Florida Department of State: (If resigned, enter resigned)
Ned D Taylor - Ste 10 For a P.O. Box Not acceptable St Augustine 71. 32.884 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.
I hereby accept the appointment as registered agent and agree to act in this capacity. 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 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 (8/05)