P07000107869

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: SPG Trust Corp.

Name of Corporation

P07000107869

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:

Stephanie Zevallos

Name of Contact Person

Seagis Property Group

Firm/Company

11340 Interchange Circle North

Address

Miramar, FL 33025

City/State and Zip Code

szevallos@seagisproperty.com

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

For further information concerning this matter, please call:

Stephanie Zevallos

Name of Contact Person

at (754 816-1830 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

CR2E045 (03/12)

(°00 p() (

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

statement of	he provisions of sections 607. change is submitted for a corp	oration organized un	ider the laws of the State of	Florida
	eder to change its registered o		ent, or both, in the State of	Florida.
	of the corporation: SPG Tr		350	_
	onshohocken, PA 194		330	
3. The mailin	g address (if different):			
4. Date of inc	orporation/qualification: 09/	27/2007 D	ocument number: P0700	0107869
5. The name a	and street address of the current partment of State: (If resigned,	t registered agent and		
	Mindy Frau			a ar
	C/O Seagis Propert	y Group LP		
	11340 Interchange	Circle North, Mi	ramar, FL 33025	67. 13
6. The name at (if changed)	nd street address of the new re	gistered agent (if cha	inged) and /or registered off	ice
	Stephanie Zevallos			***
	C/O Seagis Property Group LP			
	440401	P.O. Box NOT acceptable		
	11340 Interchange (Circle North, Mi	ramar, FL 33025	
	ress of its registered office and be identical.			
Such change wanthorized by t	as authorized by resolution d he board, or the corporation h	uly adopted by its bo as been notified in v	pard of directors or by an of writing of the change.	flicer so
Algnati.	-2 M 2	Timot	thy McKenna	
I hereby accept	the appointment as registere to comply with the provisions my duties, and I am familtar is document is being filed me that the corporation has been	d agent and agree to of all statutes relati with and accept the rely to reflect a char n notified in writing	Printed or typed name and title of act in this capacity. I've to the proper and complete to the proper and the registered office of this change.	lete s registered address, I
	nature of Registered Agent		5/23/19	
			Date	
	half of an entity:			
Stephanie Z				
13	/ped or Printed Name			
	^ * FI	LING FEE: \$35.00	x x *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)