

P08000070600

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

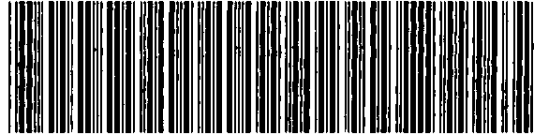
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400161691914

10/15/09--01014--005 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 OCT 29 PM 4:20

FILED

RACHANGE

B. CORRELL OCT 29 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 20, 2009

SEYMOUR RAVINSKY
7501 WILES RD.
SUITE 205
CORAL SPRINGS, FL 33067

RECEIVED
10/26/09

SUBJECT: EUSTIS MANAGER CORP.
Ref. Number: P08000070600

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

PLEASE LIST THE NAME OF THE NEW REGISTERED AGENT IN SECTION #6 OF THE DOCUMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 909A00033472

RECEIVED
DIVISION OF CORPORATIONS
OCT 27 2009
TALLAHASSEE, FL
32314

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Eustis Manager Corp.
Name of Corporation

DOCUMENT NUMBER: P 08000070600

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:

Seymour Ravinsky
Name of Contact Person

Phoenix Storage Management Corp.
Firm/Company

7501 Wiles Road, Suite 205
Address

Coral Springs, FL 33067
City/State and Zip Code

sjravin@earthlink.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Seymour Ravinsky at (954) 708-1100
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
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Eustis Manager Corp.
2. The principal office address: 7501 Wiles Road, Suite 205
Coral Springs, FL 33067
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 07/25/08 Document number: P08000070600

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)

7501 Wiles Road, Suite 205 (resigned)
Coral Springs, FL 33067

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

19400 E. State Road 44 Ave
Eustis, FL 32736

P.O. Box NOT acceptable

SEYMOUR RAVINSKY

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]
Signature of an officer or director

Seymour Ravinsky
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]
Signature of Registered Agent

Oct 9 2009
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