

PD8000103039

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 MAY 30 AM 11:55

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: St Lucie River Realty Inc

Name of Corporation

DOCUMENT NUMBER: P08000103039

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:

George F Hoge Jr

Name of Contact Person

St Lucie River Realty

Firm/Company

10380 SW Village Ctr Dr, Ste 109

Address

Port St Lucie, FL 34987

City/State and Zip Code

Geof@StLucieRiverRealty.com

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

For further information concerning this matter, please call:

George F Hoge Jr at (772) 871-1885

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: St Lucie River Realty Inc
2. The principal office address: 11791 SW Mountain Ash Cir
Port St Lucie, FL 34987
3. The mailing address (if different): 10380 SW Village Center Dr, Suite 109
Port St Lucie, FL 34987
4. Date of incorporation/qualification: 19 Nov 2008 Document number: P08000103039
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)

11791 SW Mountain Ash Cir
Port St Lucie, FL 34987

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

171 Melody Ln

Suite 106

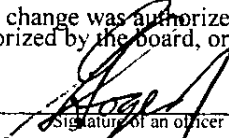
P.O. Box NOT acceptable

Ft Pierce, FL 34950

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TALLAHASSEE, FLORIDA

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 of an officer or director

George F Hoge Jr-MGR

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 of Registered Agent

28 May 2013

Date

If signing on behalf of an entity:

Typed or Printed Name

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