



# 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: 7935 TALAVERA PLACE CORPORATION
2. The principal office address: 7935 Talavera Place  
Delray Beach, FL 33446
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/19/2009 Document number: P09000044476
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)

William L. Rafferty, Jr.

7935 Talavera Place

Delray Beach, FL 33446

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

William L. Rafferty, Jr.

1401 Brickell Avenue, Suite 825

P.O. Box NOT acceptable

Miami, FL 33131

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

Anthony D. Myers, Secretary

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 in order 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

CR38045 (8/03)

H10000108828 3