PU9 000085485

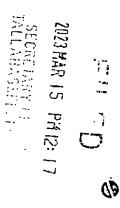
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
MAY 3 0 2023			
2023			





200404582082

03/15/23--01024--007 **35.00



COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ Name	ECT: <u>eRealty Team, imm</u> of Corporation	
DOC	ument number: <u> <i>P09000085</i>4</u>	85
The er	nclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	s matter to the following:
<i>J</i> _Ø Name	vce Maller of Contact Person	
Firm/0	Realty Team, com	
139	Casa Bay Pl	
<u>-5/</u> City/S	Augustine, FL 32080 State and Zip Code	
E-ma	il address: (to be used for future annua	im. LOM al report notification)
For fu	orther information concerning this matter,	please call:
	Joy ce Mollec Name of Contact Person	at (<u>904</u>) <u>315-274</u> 4 Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the	e Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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: eReaty Team com
2. The principal office address: 3045 Mongo Tree. Du
Edgewater, FL 32142
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/8009 Document number: P090000 85485
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)
Deborah Ridenour - Resigned
3045 Mango Tree Or
3045 Mango Tree Or Edge water, FL 33142
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
Toyce Maller 55
· · · · · · · · · · · · · · · · · · ·
St. Augustine, FL 32080
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.
Just de Maller - Diwner Signature of an officer or director Joyce L. Molles - Diwner
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.
Joyce & Maller Signature of Registered Agent 3/13/2023 Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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