P10000066623

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	2 #l)
(Oil	y/State/Zip/Filoni	σπ)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	nel
(Su	Siliess Elitity Ival	ne,
(Do	cument Number)	-
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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10 DEC -8 PM 2:52

R. A. Chang

C.COULLIETTE

DEC 08 2010

EXAMINER

COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJECT:		Concierge Realty, Inc.	
		Name of Corporation	
DOCU	MENT NUMBER:	P10000066623	
The end	closed Statement of Change	e of Registered Office/Agent and fee are submitted for fili	ng.
Please	return all correspondence co	oncerning this matter to the following:	
		Michelle Donato	
		Name of Contact Person	
		Concierge Realty	
		Firm/Company	
		4327 South Hwy 27 Suite 444	
		Address	
		OL	
Clermont, FL 34711 City/State and Zip Code			
		2.3, 2 2.p 20	
		michelledonato@cfl.rr.com	
	E-mail addres	ss: (to be used for future annual report notification)	
For fur	ther information concerning	g this matter, please call:	
	Michelle Don		3293
_	Name of Contact Pe	erson Area Code & Daytime Telepho	one 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



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

November 24, 2010

MICHELLE DONATO CONCIERGE REALTY, INC. 4327 SOUTH HWY 27., STE 444 CLERMONT, FL 34711

SUBJECT: CONCIERGE REALTY, INC.

Ref. Number: P10000066623

We have received your document for CONCIERGE REALTY, INC. 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 document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 310A00027603

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

statement of cha	mge is submitted for a co	rporation organized	07.1508, or 617.1508, Flo l under the laws of the Stat l agent, or both, in the State	e of Florida	
1. The name of t	the corporation: Conci	erge Realty, li	nc.		
2. The principal	office address: 4327 S	Hwy 27 Suite 4	44 Clermont, FL 347	711	
3. The mailing a	address (if different):	t and the state of			
4. Date of incorp	ooration/qualification:	08/13/2010	Document number:	P10000066623	
	I street address of the cur tment of State: (If resign		and registered office on fi	le with the	
	Michelle Donato				
	8637 Dover Oaks (Ct			
	Orlando, FL 32836				
6. The name and (if changed):	street address of the nev	v registered agent (if	changed) and /or registere	10 DEC -8 SECRE VAR TALLAHASS	
	Michelle Donato			ARE CO.	
	4327 S Hwy 27, St	uite 444		L17~	ווורנים
	Clarmant El 2474	P.O. Box NOT acco	eptable	PH 2: OF ST E.FLC	•
	Clermont, FL 3471	· · · · · · · · · · · · · · · · · · ·		—————————————————————————————————————	
The street addre as changed will	ess of its registered offic be identical.	e and the street add	ress of the business office	of its registere Lagent,	
		on duly adopted by ion has been notified	its board of directors or led in writing of the change	oy an officer so e.	
Muchel Signatur	le Dinocks re of an officer or director		Michelle Donato	- President	
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as regi to comply with the provi d I am familiar with and ng filed merely to reflec been notified in writing	stered agent and as sions of all statues I accept the obligat t a change in the re g of this change.	gree to act in this capacity relative to the proper an ion of my position as regi gistered office address, I	v. d complete performance stered agent. Or, if this hereby confirm that the	
Which sign	lle Joak nature of Registered Agent	<u>X</u>	11/16/20 Date	010	
If signing on be	half of an entity:				
	Michelle Donato				

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