## Placopaso

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
	101-1-101-101-1	- 40
(Cir)	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
		<del> </del>
(Doi	cument Number)	
Certified Copies	Certificates	s of Status
	-	
Special Instructions to I	Filing Officer:	
:		

Office Use Only

200302495832

08/17/17--01013--017 ++35.00

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

AUG 2 2 2017 S. YOUNG

## COVÉR LETTER

TO:	Amendment Section
	Division of Corporations

Name of Corporation

DOCUMENT NUMBER: P12000002570

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:

Mary Tracey
Name of Contact Person
Tracey Homes Inc.
Firm/Company
PO Box 151522
Address
Cape Coral FL 33915
City/State and Zip Code
tracevhomes.inc@aol.com

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

For further information concerning this matter, please call:

Mary Tracey

Name of Contact Person

at (239 ) 541-9646

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida rochange its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Tracey Homes Inc.
2. The principal	office address: 1431 SW 40th Ter Cape Coral FL 33914
3. The mailing a	ddress (if different): PO Box 151522 Cape Coral FL 33915
4. Date of incorp	poration/qualification: 01/09/2012 Document number: P12000002570
5. The name and	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	Richard Tracey
	2117 SE 6th Lane
	Cape Coral FL 33990
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered offices.
	Richard Tracey
	1431 SW 40th Ter
	P.O. Box NOT acceptable  Cape Coral FL 33914
Such change wa	ess of its registered office and the street address of the business office of its registered agent, be identical.
	be board, or the corporation has been notified in writing of the change.
Mary Signatu	Mary Tracey Printed or typed name and title
I furthér agrèe t performance of agent. Or, if thi	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete The my duties, and I am familiar with and accept the obligation of my position as registered The is document is being filed merely to reflect a change in the registered office address. I That the corporation has been notified in writing of this change.
But -	08/14/2017
· ·	half of an antity:
Richard Tra	half of an entity:
	ped 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 \* \* \*