

P12000041762

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

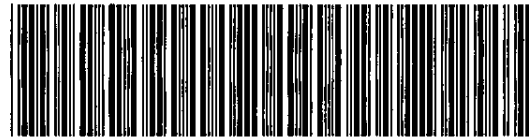
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100256236521

02/10/14--01007--016 **35.00

APPROVED
FEB 10 14
14 FEB 10 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
FEB 12 2014
EXAMINER

35.00

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNCOAST Real Estate Owned Holdings, Inc
Name of Corporation

DOCUMENT NUMBER: P12 0000 41762

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:

Jack Lee
Name of Contact Person

SUNCOAST Real Estate Owned Holdings, Inc
Firm/Company

1591 Hayley Lane #101
Address

FT Myers FL 33907
City/State and Zip Code

Lbartlett@suncoastreholdings.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laurie Bartlett at (239) 440-7411
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 F in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SHARCOAST Real Estate Owner Holdings Inc
2. The principal office address: 15961 MCGREGOR BLVD STE 4
FT MYERS FL 33908
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 5/3/12 Document number: D12000041742

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)

STUART BANKS - RESIGNED
8911 CRANES WEST CT.
FT MYERS, FL 33908

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

JACK LEE
915 Pecten CT.
P O Box NOT acceptable
SANibel, FL 33957

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]
Signature of an officer or director

JACK LEE
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]
Signature of Registered Agent

2-4-14
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

CR2E045 (03/12)

APPROVED
AND
FILED
14 FEB 10 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA