## P12000047430

| (Re                                     | equestor's Name)   | •           |
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| (Ad                                     | ldress)            |             |
| (Ad                                     | ldress)            |             |
| (Cit                                    | ty/State/Zip/Phon  | e #)        |
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| (Bu                                     | isiness Entity Nar | me)         |
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## **COVER LETTER**

| Division of Corporations  |        |
|---|--------|
| SUBJECT: METROVEST REACTY GROUP, INC.  Name of Corporation  |        |
| DOCUMENT NUMBER: 12000047430  |        |
| 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:   |        |
| DEBRA ANN RUEY Name of Contact Person   |        |
| METROVEST REALTY CROUP, INC<br>Firm/Company   |        |
| 10175 FORTUNE PARKWAY, SUITE 101 Address  |        |
| JACKSONUIUE, FLORIAA 32256 City/State and Zip Code  |        |
| DA1 RILEY @ COMCAST. NET  E-mail address: (to be used for future annual report notification)  |        |
| For further information concerning this matter, please call:  |        |
| DEBRA AND RIVEY  Name of Contact Person  at (904) 626-3452  Area Code & Daytime Telephone N   | lumber |
| Enclosed is a \$35.00 check made payable to the Department of State.  |        |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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 FLORIAA in order to change its registered office or registered agent, or both, in the State of Florida.  |
|---|
| 1. The name of the corporation: METROVEST, REALTY GROUP, INC  |
| 2. The principal office address: 12086 FT. CAROLINE ROAD, SUITE 502   |
| JACKSONVILLE, FLORIDA 32225   |
| 3. The mailing address (if different): 10150 BELLE RIVE BLVQ, #1104   |
| JACKSOUVILLE, FLORIDA 33256   |
| 4. Date of incorporation/qualification: 5 21 2012 Document number: P12000047430   |
| 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)  |
| DEBRA ANN RILLY, METROVEST KEALTY GROOM INC. 3  |
| 12086 PT. CAROLINE ROAD, SUITE 502 25 2   |
| JACKSONVILLE, FLORISH 32225   |
| 6. The name and street address of the new registered agent (if changed) and /or registered office. (if changed):  |
| DEBRA ANN RILEY, METROVEST REALTY GROUP, INC.   |
| 10175 FORTUNE PARKWAY, SUITE 101 P.O. BOX NOT acceptable  |
| JACKSONUILLE, FLORIDA 32256   |
| 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.   |
| DEBRA AUTRILLY DIRECTOR 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 of Registered Agent Date  |
| If signing on behalf of an entity:  |
| METROJEST BALTY CROUP, I J C Typed or Printed Name  |

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

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