

P13000046138

(Requestor's Name)

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(Address)

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(Business Entity Name)

(Document Number)

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13 DEC -2 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

C. LEWIS  
DEC 9 2013  
EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Caribbean Tropic Properties, INC  
Name of Corporation

**DOCUMENT NUMBER:** P13000046138

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:

Juan Palencia

Name of Contact Person

Caribbean Tropic Properties, INC

Firm/Company

141 Northwest 20th Street, STE B-13

Address

Boca Raton, Florida 33431

City/State and Zip Code

juan@youroasisinparadise.com

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

For further information concerning this matter, please call:

Juan Palencia

Name of Contact Person

at ( 561 ) 829-8322

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Caribbean Tropic Properties, INC
2. The principal office address: 141 Northwest 20th Street, STE B-13  
Boca Raton, Florida 33431
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/24/2013 Document number: P13000046138
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)

Clifton A. Goodrich

712 US Highway 1, Suite 30116

North Palm Beach, Florida 33408

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

Caribbean Property Consultants, INC

141 Northwest 20th Street, STE B-13

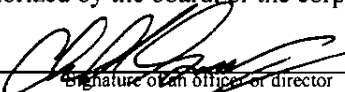
P.O. Box NOT acceptable

Boca Raton, Florida 33431

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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 of an officer or director

Clifton A. Goodrich - Title P

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

November 25, 2013

Date

If signing on behalf of an entity:

Clifton A. Goodrich  
\_\_\_\_\_  
Typed or Printed Name

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