

P13000066879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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14 JUN 27 PM 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 14 2015  
T. LEMIEUX

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Florida Waterfront Realty, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P13 0000 66879

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:

Amy Rose  
Name of Contact Person

Florida Waterfront Realty Inc.  
Firm/Company

1085 Atlantic Blvd #21  
Address

Atlantic Beach FL 32233  
City/State and Zip Code

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

For further information concerning this matter, please call:

Amy Rose at 904, 451-2593  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Florida Waterfront Realty, Inc  
2. The principal office address: 1085 Atlantic Blvd #21  
Atlantic Beach FL 32233  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 8/12/13 Document number: P13000066879

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)

Amy Rose  
806 Cavalla Rd  
Atlantic Beach FL 32233

(address chg only)

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

Amy Rose  
1085 Atlantic Blvd #21  
P.O. Box NOT acceptable  
Atlantic Beach FL 32233

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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.

Amy E Rose Amy Rose, Principal  
Signature of an officer or 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.*

Amy E Rose 6/23/14  
Signature of Registered Agent Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE