

PIH 000028558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

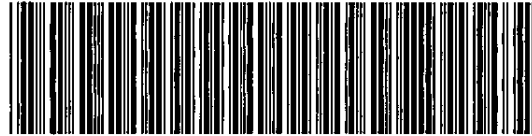
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

9/20/16

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AWESOME REAL ESTATE REFERRAL NETWORK INC.
Name of Corporation

DOCUMENT NUMBER: P14000028558

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:

NEDA DARLENE TAYLOR

Name of Contact Person

AWESOME REAL ESTATE REFERRAL NETWORK INC.

Firm/Company

2800 N SIXTH STREET SUITE 2

Address

ST. AUGUSTINE, FL. 32084

City/State and Zip Code

DARLENE@AWESOMEREALESTATEINC.COM

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

For further information concerning this matter, please call:

NEDA TAYLOR

Name of Contact Person

at (**904**) **669-7876**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 26, 2016

NEDA DARLENE TAYLOR
2800 N SIXTH ST., STE 2
ST. AUGUSTINE, FL 32084

SUBJECT: AWESOME REAL ESTATE REFERRAL NETWORK INC.
Ref. Number: P14000028558

We have received your document for AWESOME REAL ESTATE REFERRAL NETWORK INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain
Regulatory Specialist II

Letter Number: 816A00018221

**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: AWESOME REAL ESTATE INC.
2. The principal office address: 2800 N SIXTH STREET SUITE 2
ST.AUGUSTINE, FL. 32084
3. The mailing address (if different): _____
4. Date of incorporation/qualification: MARCH 2014 Document number: P14000028558

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)

2825 LEWIS SPEEDWAY STE 101

ST. AUGUSTINE, FL. 32084

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

AWESOME REAL ESTATE REFERRAL INC.

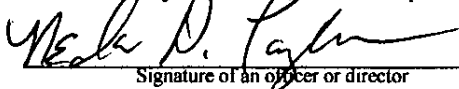
2800 N SIXTH STREET SUITE 2

P.O. Box NOT acceptable

ST. AUGUSTINE, FL. 32084

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

NEDA DARLENE TAYLOR PRESIDENT

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

9-9-16

Date

If signing on behalf of an entity:

NEDA DARLENE TAYLOR

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)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA