

P14000076717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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S TALLENT

MAY 14 2018

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18 MAY 10 PM 1:17

R/A-CH

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tewes Mortgage, Inc.

Name of Corporation

DOCUMENT NUMBER: P14000076717

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:

Brian Tewes

Name of Contact Person

Tewes Mortgage, Inc.

Firm/Company

5409 Overseas Hwy, #212

Address

Marathon, FL 33050

City/State and Zip Code

Brian@TewesMortgage.com ✓

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

For further information concerning this matter, please call:

Brian Tewes

Name of Contact Person

at (305) 495-6000

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

RECEIVED
18 APR 20 PM 2:40
CR2045 (3)
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 20, 2018

BRIAN TEWES
TEWES MORTGAGE, INC.
5409 OVERSEAS HWY, #212
MARATHON, FL 33050

SUBJECT: TEWES MORTGAGE, INC.
Ref. Number: P14000076717

We have received your document for TEWES MORTGAGE, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 618A00008140

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MAY 10 PM 3:46
RETARY OF
AHASSE

**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: Tewes Mortgage, Inc.
2. The principal office address: 11400 Overseas Hwy, #212, Marathon, FL 33050
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 9/16/2014 Document number: P14000076717

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)

Brian Tewes

5800 Overseas Hwy, #40A

Marathon, FL 33050

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

Brian Tewes

5409 Overseas Hwy, #401

P.O. Box NOT acceptable

Marathon, FL 33050

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.

Brian Tewes
Signature of an officer or director

Brian Tewes - 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.

Brian Tewes
Signature of Registered Agent

4/16/18
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)