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SECRETARY OF STATE

2015 OCT 26 PM 3: L

C. CAKKUTHERS

COVER LETTER ...

TO: Amendment Section Division of Corporations

_{subject:} AMT Properties, Inc.

Name of Corporation

DOCUMENT NUMBER: P14000085856

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:

Vincent Anthony

Name of Contact Person

Firm/Company

1001 Ridgeway Drive

Address

North Fort Myers, FL 33903

City/State and Zip Code

vincent.stephen@outlook.com

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

For further information concerning this matter, please call:

Vincent Anthony

, 239

219-2629

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

statement of cha	inge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Statut ganized under the laws of the State of gistered agent, or both, in the State of Florid		
1. The name of	the corporation: AMT Properties	s, Inc.		
2. The principal	office address: 1001 Ridgeway	Drive, North Fort Myers, FL 339	03	
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 10/20/201	4 Document number: P1400008	15856	
	d street address of the current register tment of State: (If resigned, enter res	ed agent and registered office on file with the igned)	e	
	UNITED STATES CORPO	DRATION AGENTS, INC.		
	13302 WINDING OAKS COURT, SUITE A			
	TAMPA, FL 33612		Z#15 OCT 26 SLCSCTAR SALLAHASS	r
6. The name and (if changed):	d street address of the new registered	agent (if changed) and /or registered office	লে"	;; ;
	Vincent Anthony		PH 3	
	1001 Ridgeway Drive		3: 46 3: 145 08:05	
	North Fort Myers, FL 3390	NOT acceptable	7	
The street addre	ess of its registered office and the str be identical.	reet address of the business office of its regi	istered agent,	
Such change was authorized by the	as authorized by resolution duly ado ne board, or the corporation has been	pted-by its board of directors or by an office i notified in writing of the change.	er so	
Im	re of an officer or director	Vincent Anthony, President		
I hereby accept I further agree	the appointment as registered agent to comply with the provisions of all	71	, egistered dress, I	
Vu	who	10/6/2015		
	nature of Registered Agent	Date		
Vince	whalf of an entity: nt Anthrop yped or Printed Name			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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