P150000 73874

| (Requestor's Name) | | | | | | |
|---|--|--|--|--|--|--|
| (Address) | | | | | | |
| (Address) | | | | | | |
| (City/State/Zip/Phone #) | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
| (Business Entity Name) | | | | | | |
| (Document Number) | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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2023 FEB -9 AM 9: 07



Office Use Only



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

| Date: | 02/10/2023 | |
|--------|-------------------------------------|--------------|
| | Greg Pintacuda | |
| | ence #: 1907422 | |
| Entity | Name: ORL | REALTORS INC |
| | Articles of Incorporation/Authoriza | |
| | Amendment | |
| | Change of Agent | |
| L | Reinstatement | |
| | Conversion | |
| | Merger | |
| | DissolutionWithdrawal | |
| | Fictitious Name | |
| | Other | |
| | | |
| Author | rized Amount:\$357 | |
| Signat | ure: | |

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607,050 unge is submitted for a corpor | ation organized under | the laws of the St | ate of FL | | |
|------------------------------------|---|---|---|-----------------------------|--|--|
| | | ODI | registered agent, or both, in the State of Florida. ORL REALTORS INC | | | |
| | the corporation: | | 23412 Olde Meadowbrook Circle | | | |
| 2. The principal | office address: | 23412 Oluk | - Weadowbloo | 34134 | | |
| 3. The mailing a | nddress (if different): | | | J4104 | | |
| 4. Date of incorp | poration/qualification: 0 | 9/01/2015 Doc | ument number: | P15000073874 | | |
| | d street address of the current rtment of State: (If resigned, e | - | egistered office on | file with the | | |
| | | Irwin, Dave | | | | |
| | Estro FL 34134 | | | | | |
| | Estro | FL | 34134 | | | |
| 6. The name and (if changed): | d street address of the new reg | istered agent (if chang | , c | | | |
| 115 North Calhoun Street, Suite 4 | | | | | | |
| | | P.O. Box NOT acceptable | Suite 4 | | | |
| | Tallahassee | e Flor | rida 3230 f | <u> </u> | | |
| The street address changed will | ess of its registered office and be identical. | I the street address of | the business offic | ce of its registered agent. | | |
| Such change wa authorized by th | as authorized by resolution du ne board, or the corporation h | aly adopted by its boa as been notified in w | rd of directors or riting of the chang | by an officer so ge. | | |
| /s/ Brian Broo | | Bria | n Brockman | President | | |
| Lhereby accept | the appointment as registere to comply with the provisions my duties, and I am familiar is document is being filed me that the corporation has been | d agent and agree to of all statutes relative with and accept the a rely to reflect a chang n notified in writing a | Printed or typed name act in this capacing to the proper and the proper and the proper are to the registere of this change. | tr: | | |
| /s/ Kathie M | Fleck | | 2/9/20 | 23 | | |
| | nature of Registered Agent | | Date | | | |
| If signing on be | half of an entity: | | | | | |
| Kathie N | // Fleck Asst Secretary | | | | | |
| T | yped or Printed Name | | | | | |

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