

PA5000017375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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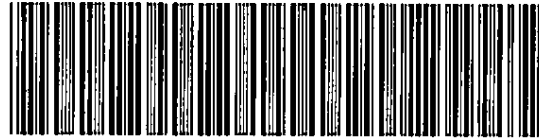
(Business Entity Name)

(Document Number)

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2020 AUG 24 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FL

52 10/08/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DEVINE REAL ESTATE INC.
Name of Corporation

DOCUMENT NUMBER: P95000017375

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:

ANN S DEVINE
Name of Contact Person

DEVINE REAL ESTATE INC
Firm/Company

10150 HIGHLAND MANOR DRIVE
Address

TAMPA, FLORIDA 33610-9712
City/State and Zip Code

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

For further information concerning this matter, please call:

ANN S DEVINE at (772) 713 7589
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: DEVINE REAL ESTATE INC

2. The principal office address: 10150 Highland Manor Drive
Tampa, FL 33610-9712

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/2/1995 Document number: P95000017375

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)

ANN S DEVINE
732 North Stone St.
DELAND, FL 32720

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

ANN S DEVINE
10150 HIGHLAND MANOR DRIVE
TAMPA, FL 33610-9712

P.O. Box NOT acceptable

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]
Signature of an officer or director

ANN S DEVINE
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]
Signature of Registered Agent

August 20, 2020
Date

If signing on behalf of an entity:

ANN S DEVINE
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 (04/13)

SECRETARY OF STATE
TALLAHASSEE, FL

2020 AUG 24 AM 11:06

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