

P95000072548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

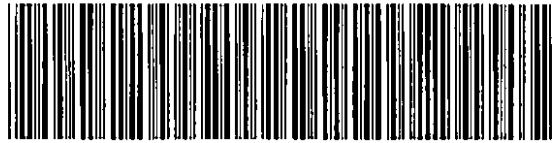
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Kimberly Thornton
gave permission to
white out P.O Box
for prime address.
8/27/18

Office Use Only



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08/21/18--0018--010 9:31:00

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2018 AUG 21 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FL

R. WHITE
AUG 27 2018

RACHY



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 22, 2018

KIMBERLY P. THORNTON
NEWCO REALTY ASSOCIATES, INC.
P.O. BOX 855
BONITA SPRINGS, FL 34133

SUBJECT: NEWCO REALTY ASSOCIATES, INC.
Ref. Number: P95000072548

We have received your document for NEWCO REALTY ASSOCIATES, 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):

A post office box is not an acceptable address for the registered agent.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 918A00017403

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NEWCO REALTY ASSOCIATES INC
Name of Corporation

DOCUMENT NUMBER: P9500 00 72548

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:

KIMBERLY P. THORNTON
Name of Contact Person

NEWCO REALTY ASSOCIATES INC
Firm/Company

PO BOX 855
Address

BONITA SPRINGS FL 34133
City/State and Zip Code

KTHORNTON@ORANGETREEASSOCIATES.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KIMBERLY P. THORNTON at (239) 596-4088
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

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: NEWCO REALTY ASSOCIATES INC
- 2. The principal office address: _____
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 5/11/95 9/18/95 Document number: 195000072548

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)

STEPHEN LOWITZ
1715 MONROE STREET
FT. MYERS FL 33902

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

HF REGISTERED AGENTS LLC
1715 MONROE STREET
FT. MYERS FL 33901

P.O. Box NOT acceptable

SECRETARY OF STATE
TALLAHASSEE, FL

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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.

Roberto Bolt
Signature of an officer or director

ROBERTO BOLT 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]
Signature of Registered Agent

8/10/18
Date

If signing on behalf of an entity:

ERIN E. HOWE-TOLL, Vice-President
Typed or Printed Name

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