Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150001706913)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)205-8842

Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE OLP FT. MYERS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

JUL 1 4 2015

C LEWIS

Electronic Filing Menu

Corporate Filing Menu

Help

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the ange is submitted for a corporation organized under the laws of the State of Plotida er to change its registered office or registered agent, or both, in the State of Florida.	is 	
1. The name of t	the corneration: OLP PT. MYERS, INC.		
2. The principal	60 Cutter Mill Bood 303 Great Neck NV 1102)		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 8/12/1996 Document number: P96000066737		
	d street address of the current registered agent and registered office on file with the riment of State: (If resigned, enter resigned)		
	United Corporate Services, Inc.		
	9200 South Dadeland Blvd.	꼆	710
	Miami, FL 33156-0000	JUL	DIVISION
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office		
	C T Corporation System	AH 8:	らない
	c/o C T Corporation System, 1200 South Pine Island Road	F) 8	
	P.O. Box NOT acceptable	7	:
	Plantation, Florida 33324		
The street address changed will	ess of its registered office and the street address of the business office of its registered I be identical.	d agent,	
Such change wa authorized by ti	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.		
	JoAn Tolosa, Secretary		
-	ure of an officer or director Printed or typed name and little		
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my dulies, and I am familiar with and accept the obligation of my position as registe his document is being filed merely to reflect a change in the registered office address, that the corporation has been notified in writing of this change.	ered I	
	rporation System 7/13/2015		
	Brature of Registred Agent		
If signing on be	chalf of an entity: Joseph Tamimi Vice President		
т	Typod or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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