

PG60000087120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AD 7.11.06

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ORIOLE REALTY CORP.
(Name of Corporation)

DOCUMENT NUMBER: P96000087120

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:

CAROL BELASCO
(Name of Contact Person)

(Firm/Company)

1250 E. Hallandale Beach Blvd. Suite 904
(Address)

Hallandale Beach, FL 33009
(City/State and Zip Code)

For further information concerning this matter, please call:

CAROL BELASCO
(Name of Contact Person)

at (954) 456-7255
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 28, 2006

CAROL BELASCO
1250 E. HALLANDALE BEACH BLVD.
SUITE 904
HALLANDALE BEACH, FL 33009

SUBJECT: ORIOLE REALTY CORP.
Ref. Number: P96000087120

We have received your document for ORIOLE REALTY CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 106A00042713

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: Oriole Realty Corp.
2. The principal office address: 1250 E. Hallandale Beach Blvd., Suite 904
Hallandale Florida 33009
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10-22-1996 Document number: 796000087120
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Corpro, Inc.
2699 South Bayshore Drive, 7th Floor
Miami FL 33133

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

CAROL BELASCO
1250 E. Hallandale Beach Blvd., Suite 904
(P.O. Box NOT acceptable)
Hallandale, FL 33009

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.

Prigle Realty Corp.

(Signature of an officer or director)

PAUL CLEEMAN

(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.

Carl Belarso
(Signature of Registered Agent)

7-5-06
(Date)

If signing on behalf of an entity:

(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 32311
CR2E045 (8/05)

FILED
06 JUL 11 AM 10:00
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA
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