P960000 96494

(Re	equestor's Name)				
(Address)					
(Ad	dress)				
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nam	ne)			
(Do	cument Number)				
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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05/12/20--01014--004 **35.00



WAY 29 2020

COVER LETTER

TO:	Amendment Section Division of Corporations	,
SUBJ Name	ECT: WEST ROADS PLAZA, INC. of Corporation	
Hame	or Corporation	
DOC	UMENT NUMBER: 196000096494	
The er	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	s matter to the following:
John T	·oth	
Name	of Contact Person	
-	Roads Plaza, Inc.	
Firm/	Company	
20 Sna	ap Dragon Court	
Addre	SS	
Ashev	ille, NC 28804	
City/S	itate and Zip Code	
	john@tothrealty.com	
E-ma	il address: (to be used for future annua	l report notification)
For fu	rther information concerning this matter.	please call:
John 1	oth	at (561 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Name of Contact Person	at (561) 308-1941 Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address:
		Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tananassee, FL 32314	Tallahassee, FL 32303

CR2E045 (04/13)

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

•	provisions of sections 607.0502, 617.050					
	nge is submitted for a corporation orgai r to change its registered office or regist					
	he corporation: West Roads Plaza, Inc.	Ü	Ž			
a. The name of t	office address: 20 Snap Dragon Court, As	heville, NC 28804		-		
2. The principal	office address:					
3. The mailing a	ddress (if different):				_	
4. Date of incorp	poration/qualification: 11/26/1996	Document number:	P96000096494			
	street address of the current registered attment of State: (If resigned, enter resign		on file with the	•		
	Toth, John					
	20 Snap Dragon Ct.					
	Asheville, FL 28804					
6. The name and (if changed):	street address of the new registered age	ent (if changed) and /or reg	istered office			
	InCorp Services, Inc.					
	17888 67th Court North	-		∄ .0	20	
	P.O Box NOT acceptable				2020 HAY	
	Loxahatchee, FL 33470				ΑY	
The street addre	ess of its registered office and the street be identical.	address of the business of	office of its regi	stered a	agent,	į
Such change was authorized by th	is authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directors of the ch	s or by an office lange.	ir so	PH C	: ``
(h	Wolf	John Toth, President	,		· 63	
	re of an officer or director	•••	d name and title			
of my duties, an abcument is bei	the appointment as registered agent are comply with the provisions of all stated I am familiar with and accept the object in the provisions of all stated I am familiar with and accept the object a change in the been notified in writing of this change	lutes retative to the prope ligation of my position as he registered office addre.	r ana compieie registered agei	nt. Or.	it this	
Tack	u Officio)	05/06/2020				
Sign	nature of Registered Agent	Da	de			
If signing on be	half of an entity:					
	Filippis on behalf of InCorp Ser	vices, Inc.				
T	yped or Printed Name					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (04/13)