Requestor's Name			
2343 SE	Reelly Corp. Maniton Terrace udle, Fl. 34952		
City/State COREGRATION	1000	T VUMBER(S) (if kn) way	25 Only
1(Сол	poration Name)	(Document #)	
2(Соп	poration Name)	(Document #)	
3(Con	poration Name)	(Document #)	97. UL.
4(Соп	poration Name)	(Document #)	FILED FILED 25 AT NAY CA
☐ Walk in	Pick up time	Certified Cop	ATT 10: 23
Mail out	Will wait Pho	tocopy Certificate of	Status
NEW FILINGS	AMENDMENTS		
Profit	Amendment		
NonProfit	Resignation of R.A., Of	ficer/ Director	02248196
Limited Liability	Change of Registered A	gent \	7/25/9701098005 ****35.00 *****35.00
Domestication	Dissolution/Withdrawa	111	**************************************
Other	Merger	APA	•
OTHER FILINGS  Annual Report  Fictitious Name  Name Reservation	REGISTRATIO QUALIFICATI  Foreign Limited Partnership Reinstatement	ON COOP	
	Trademark	1/2 //	
	Other	J 64, 3	4
R2E031(1/95)		Examiner's Initia	uls

## Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of section 607.0502 or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of <u>Florida</u>, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is:

SIGNET REALTY CORP.

1. The name of the corporation is: SIGNET KEALTY CORP
1a. Date of incorporation <u>APRIL 21, 1997</u> Document number <u>P970000353</u> 57
2. The name and address of the current registered agent and office:
AMERILAWYER CHARTERED, 343 ALMERIA AVENUE
CORAL GABLES, FL 33134 ESS 9
3. The name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  (P.O. Box Not Acceptable)  (P.O. Box Not Acceptable)  (P.O. Box Not Acceptable)
PORT ST LUCIE, FL 34952 BY 5
The street address of its registered agent 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.
SIGNATURE CHOCK CASA,

SIGNATURE (name and xitie) Level dest

DATE 7/23/96

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF

PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED.

PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

SIGNATURE (Registered Agent)

DATE \_\_\_\_\_\_7/23/96

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-90) FILING FEE: \$35.00