P9700054146

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(City/State/Zip/Prione #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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SECRETARY OF STATE TALL AHASSEE, FIORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Tropical Realty of Florida Inc. Name of Corporation DOCUMENT NUMBER: P97000054146
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:
Gilma Restrepo Name of Contact Person
Tropical Island Realty Firm/Company
12620 Kenwood LN Unit C
Ft. Myers, FL 33907 City/State and Zip Code
aireto@aol.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Gilma Restress at (239) 321-0040 Name of Contact Person Area Code & Daytime Telephone Number
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 Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT ORBOTH 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: Tropical Island Realty of Florid, Inc.
2. The principal office address: 12734 Kenwood LN, Suite 80
Ft. Myers, FL 33907
3. The mailing address (if different): 12620 Kenwood LN, Unit C
Tt Myers, FL 33907
4. Date of incorporation/qualification: June 1997 Document number: P97000054/46
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)
Blanca I. Santiago (RosigNED) = Do
902 SE 6th St
Cape Coral, FL 33990 3
(if changed):
Gilma Kestrepo
12734 Kenwad LN, Suite 80 P.O. Box NOT acceptable
Ft. Myers, fl 33907
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.
Signature of an officer or director Printed or typed name and little
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.
Hannoftration 8/5/2018
Signature of Registered Agent If signing on behalf of an entity: Date
Typed or Printed Name

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