

P97000083402

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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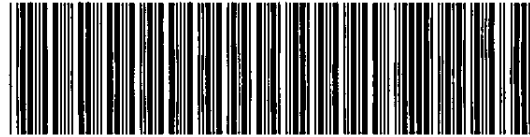
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 21 2015
T. LEMIEUX

**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: Oceanbreeze Properties, Inc
2. The principal office address: 800 Indian River Blvd
Edgewater, FL 32132
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 9-26-1997 Document number: P97000083402
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)

800 Indian River Blvd
Edgewater, FL 32132

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

215 CANAL Street
P.O. Box NOT acceptable
New Smyrna Beach, FL 32168

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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.

Teresa Voshell
Signature of an officer or director

Teresa Voshell, Pres.
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.

Signature of Registered Agent

Date

If signing on behalf of an entity:

Typed or Printed Name

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

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Oceanbreeze Properties, Inc.
Name of Corporation

DOCUMENT NUMBER: P97000083402

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:

Teresa Voshell

Name of Contact Person

Oceanbreeze Properties, Inc.

Firm/Company

215 Canal Street

Address

New Smyrna Beach, Fl. 32168

City/State and Zip Code

oceanbreeze2@cfl.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Teresa Voshell

Name of Contact Person

386 451-1182

at (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