

Division of Corporations Public Access System

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Division of Corporations

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Account Name

1 C T CORPORATION SYSTEM

Phone

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## REGISTERED AGENT CHANGE

LEVITT REALTY SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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## 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	ı Statutes,	
this statement of change is submitted for a corporation organized under the laws of the State of	rf	
Florida in order to change its registered office or registered agent, or both, in	the State	ı
of Florida.		
1. The name of the corporation: Levitt Realty Services, Inc.		
	273.	40
2. The principal office address: 6550 Huntington Lakes Circle #104, Naples, FL 33999	<u>ال</u> احدة	pc1
3. The mailing address (if different): 7777 Glades Road, Suite 410, Bocz Raton, FL 33434	چور <i>ی</i>	22
5. The maining address (it different).	mo	_
		WHIO:
4, Date of incorporation/qualification: 10/10/1990 Document number: S05023	22	
	- E	39
5. The name and street address of the current registered agent and registered office on file with	1 the <sup>™</sup>	
Florida Department of State:		
Ieffrey Hoyos		
7777 Glades Road		
Boca Raton, FL 33434		
6. The name and street address of the new registered agent (if changed) and /or registered	office (if	?
changed):		
C T Corporation System		
c/o C T Corporation System  (P.O. Box or personal mailbox NOT acceptable)		
1200 South Pine Island Road, Plantation, Florida 33324		
The street address of its registered office and the street address of the business office of its ragent, as changed will be identical.		
Such change was authorized by resolution duly adopted by its board of directors or by an of authorized by the board, or the corporation has been notified in writing of the change.	ficer so	
(Signature of an officer) character of the board)  Jeffen Hours, 5VP/C (Signature of an officer) character of the board)	FO.	
I hereby accept the appointment as registered agent and agree to act in this capacity.  I first agree the comply with the provisions of all statutes relative to the many and comp	lote	
performance of my duties, and I am familiar with and accept the obligation of my position of	25	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to somply with the provisions of all statutes relative to the proper and complete performance of my duities, and I am familiar with and accept the obligation of my position a registered agent. Or, if this document is being filed merely to reflect a change in the registe office address, I hereby confirm that the corporation has been notified in writing of this change in the corporation has been notified in writing of this change.	erea Ince.	
C T Corporation System	···o	
By: /0/21/04		
(Segmeture of Registered Agent) (Date)	<u> </u>	
If signing on behalf of an suity: PETER F. SOUZA		
ASSISTANT SECRETARY		
(Typed or Printed Name) (Capacity)		

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

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