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SECRETARY OF STATE TALLAHASSEE.FLORIDA

JAN 22 2015 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Calco Development Corporation, Inc.

Name of Corporation

\$75901

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:

James W. Knight

Name of Contact Person

Calco Development Corporation, Inc.

Firm/Company

123 E. Atlantic Ave, 2nd Floor

Address

Delray Beach, FL 33444

City/State and Zip Code

jim@knightgroupfl.com

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

For further information concerning this matter, please call:

James W. Knight

Name of Contact Person

Area Code & Davtime Telephone Num

Area Code & Davtime Telephone Num

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

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statuinge is submitted for a corporation organized under the laws of the State of Florical to change its registered office or registered agent, or both, in the State of Florical | da | <u></u> |
|---|--|-----------|----------------------------|
| The name of t The principal | he corporation: Calco Development Corporation, Inc. office address: 123 E Atlantic Ave, 2nd Floor, Delray Beach, | FL 33 | 3444 |
| 3. The mailing a | ddress (if different): | | |
| 4. Date of incorp | oration/qualification: 8/22/1991 Document number: S75901 | | |
| | street address of the current registered agent and registered office on file with the them to f State: (If resigned, enter resigned) | ie | |
| • | Knight, James W | | |
| | 10 SE 1st Ave, 2nd Floor Suite A | | ₹ |
| | Delray Beach, FL 33444 | 5 JA | SECRI |
| 6. The name and (if changed): | street address of the new registered agent (if changed) and /or registered office | JAN 20 PI | FILEI ETARY O HASSEE |
| | Knight, James W | PH 4: 13 | F ST |
| | 123 E Atlantic Ave, 2nd Floor | သ | ATE RIDA |
| | P.O. Box NOT acceptable Delray Beach, FL 33444 | | |
| The street addre | ss of its registered office and the street address of the business office of its reg | istered | agent, |
| Such change was authorized by th | s authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change. | er so | |
| Signatur | James W. Knight, | <u>c</u> | Sice! |
| I hereby accept to I further agree to performance of the agent. Or, if this | the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as residuent is being filed merely to reflect a change in the registered office adequate the corporation has been notified in writing of this change. | poietor. | ed |
| | ature of Registered Agent 14/2015 | | |
| If signing on beh | | | |
| James | | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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