

# N00298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

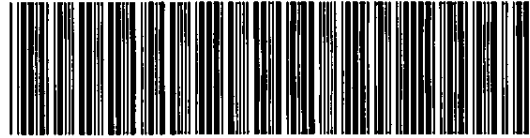
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800267509378

12/19/14--01018--012 \*\*35.00

FILED

14 DEC 19 PM 4:44

FILED

*PA Chang*

12-31-14

DC

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bella Lago Homeowners Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N00298

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:

Claudette Atkinson, LCAM  
Name of Contact Person

Firm/Company

5070 E Sanctuary Way  
Address

West Palm Beach, FL 33417  
City/State and Zip Code

BELLA LAGO35@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Claudette Atkinson, LCAM at ( 561 ) 847-4244  
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  
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**

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: Bella Lago Homeowners Association, Inc.
- 2. The principal office address: 5070 E Sanctuary Way West Palm Beach, FL 33417
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 12/12/1983 Document number: N00298

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)

ST JOHN ROSSIN BURR & LEMME PPLC  
1601 FORUM PLACE, SUITE 701  
WEST PALM BEACH, FL 33401

FILED  
14 DEC 19 PM 4:14  
TALLAHASSEE, FLORIDA

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

KONYK & LEMME, PLLC  
777 South Flagler, Suite 800 - West Tower  
P.O. Box NOT acceptable  
WEST PALM BEACH, FL 33401

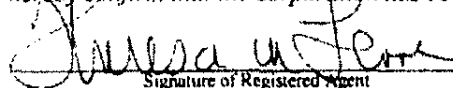
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

John McCarty, President  
\_\_\_\_\_  
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

12/15/2014  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Theresa M. Lemme  
\_\_\_\_\_  
Typed or Printed Name

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

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