

NO4000003117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

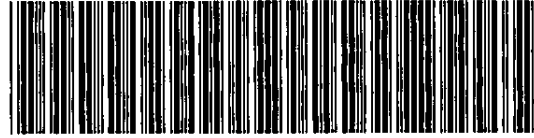
(Business Entity Name)

(Document Number)

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White

SEP 15 2016

R. WHITE

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: Altessa III at Vasari Condominium Association, Inc.
2. The principal office address: 2685 Horseshoe Drive S 215
Naples, FL 34104
3. The mailing address (if different): Resort Management 2685 Horseshoe Drive S
Naples, FL 34104
4. Date of incorporation/qualification: 03/25/2004 Document number: N04000003117
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)

Becker & Poliakoff
28500 Altessa Way 101
Bonita Springs, FL 34135

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

Becker & Poliakoff, P.A.
12140 Carissa Commerce Court, Suite 200
P.O. Box NOT acceptable
Fort Myers, FL 33966

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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.

Signature of an officer or director

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.

Joseph E Adams
Signature of Registered Agent

August 10, 2016
Date

If signing on behalf of an entity:

Joseph E. Adams, Esq.
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