N04000011523

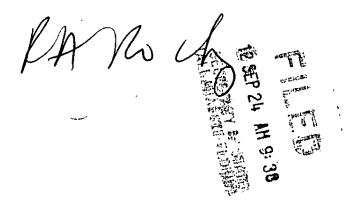
(Re	questor's Name)	
(Ade	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	
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SEP 25 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: AVILA EL JARDINA CONDOMINION ASSOC. INC.

DOCUMENT NUMBER: N 040000 11523

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:

Marc Bellapianta

Name of Contact Person

Flagler Palm Coast Property Management, Inc.

Firm/Company

50 Leanni Way, Suite B6

Palm Coast, FL 32137

City/State and Zip Code

mbellapianta@fpcpm.com

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

For further information concerning this matter, please call:

Marc Bellapianta

Name of Contact Person

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 Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
 The name of t The principal 	office address: 115 Calle El Jardin, St Augustine, FL 32095
3. The mailing a	ddress (if different): P.O. Box 350492, Palm Coast, FL 32135
4. Date of incorp	poration/qualification: 12/10/04 Document number: NOY00001/523
5. The name and	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Southern States Management Group, Inc.
	2 Camino Del Mar
	Palm Coast, FL 32137
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Flagler Palm Coast Property Management, Inc.
	50 Leanni Way, Suite B6
	P.O. Box NOT acceptable Palm Coast, FL 32137
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa	is authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
25	Tre of an officer or director WILLIAM J. FISH - DIRECTOR Printed or typed name and title
I hereby accept	the appointment as registered agent and agree to act in this capacity. To 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 registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Mell	9/17/12
_	half of an entity:
Marc Bellar	
	yped or Printed Name

* * * FILING FEE: \$35,00 * * *