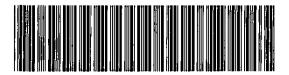
NO4943

Dorothy Springs (Requestor's Name)
P.O. Box 1624
Palm Harport 3468
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2011

DOROTHY SPRIGGS P. O. BOX 1624 PALM HARBOR, FL 34682

SUBJECT: CASA DEL SOL ASSOCIATION, INC.

Ref. Number: N04943

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

PLEASE LIST THE NAME AND ADDRESSES OF THE NEW REGISTERED AGENT IN SECTION 6.

The designation of the registered agent must be at a Florida street address.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 211A00025088

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

Fursuant 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 Floridá.
1. The name of the corporation: CASA Dol Sol Association, Tale.
2. The principal office address: 90, Dun Cast Base IN Services
2821 Sexbeaks LN #A Palm Harbor Fl 34684
3. The mailing address (if different): P.O. Box 1624 PAIN Limbon F1 34682
4. Date of incorporation/qualification: 1978 Document number: Nov943
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) SENTRY MANAGEMENT INC
1 2 180 WEST SR 434, SUITE 5000 ==
LONGWOOD, FL 32779
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Dokothy Springs
PAIN HARbor FLORIDA 34684
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.
New Marine of the or type and the signature of the signat
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.
Westly Duisy - after 18/29/2011 Springer of Registry Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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