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## REGISTERED AGENT CHANGE MEADOW POINTE IV-A MASTER ASSOCIATION, INC.

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Y SULKER

MAY 28 2020 Help

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

statement of ch	provisions of sections 607 0502, 617 0 ange is submitted for a corporation org er to change its registered office or regi	anized under the laws of th	ie State of FLO	RIDA
	the corporation: MEADOW POINTE I	_	•	.417
2. The principa	l office address: 2100 S HIAWASSEE			
ORLANDO, F				· · · · · · · · · · · · · · · · · · ·
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 05/04/2012	Document number	.: N120000045	575 —
5. The name an Florida Depa	d street address of the current registered atment of State: (If resigned, enter resig	lagent and registered officened)	e on file with th	¢
	EVERGREEN LIFESTYLES MANAG	SEMENT, LLC		
	2100 S HIAWASSEE RD			
ORLANDO, FL 32835				
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or reg	SEGUE TA	20 20 20 20 20 20 20 20 20 20 20 20 20 2
	JONATHAN J. ELLIS		(S = N	· ··
	101 E. KENNEDY BLVD., STE 2800			)
	POB	lox NOT acceptable		i i i
	TAMPA, FL 33602	······································	7 X X X	0
The street address changed will	ess of its registered office and the stree be identical.	rt address of the business of	office of its reg	istered agent
Such change was authorized by the	as authorized by resolution duly adopte he board, or the corporation has been n A	ed by its board of director notified in writing of the cl	s or by an offic hange.	(ct 20
Ans	h	GEORGE LANCOS, F		
<del>-</del>	the appointment as registered agent a to comply with the provisions of all sta id I am familiar with and accept the ob- ing filed merely to reflect a change in t s been notified in writing of this chang.	:	d name and tide pacity or und complete cregistered ago ess, I hereby co	e performanc ni. Or if thi nfirm that the
, /	majore of Registers Agen.	5/15/2		·
If styning on be	chalf of an entity:	,		
	yped or Printed Name * * * FILING F	EE: \$35.00 * * *		
<i>V</i> M	MAKE CHECKS PAYABLE TO FL AIL TO: DIVISION OF CORPORATIONS, I	Orida Department of S P.O. Box 6327, Tallaha	STATE SSEE, FL 3231	4

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