

N15 000 000943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

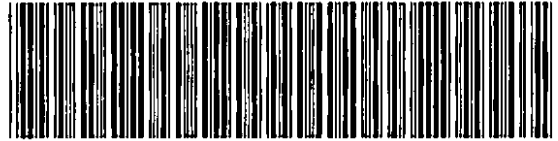
(Business Entity Name)

(Document Number)

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ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Amendment to Exploratory Lakewood Ranch
Name of Corporation

DOCUMENT NUMBER: 115000000943

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:

Kelly A Moran
Name of Contact Person

Resource Property Management
Firm/Company

1300 Park St
Address

Seminole, FL 33777
City/State and Zip Code

E-mail address: k.moran@resourcepropertymanagement.com
(to be used for future annual report notification)

For further information concerning this matter, please call:

Kelly A Moran at (727) 796-5900
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

DEC 21 2020

December 15, 2020

KELLY MORAN
7300 PARK ST
SEMINOLE, FL 33777

SUBJECT: SARACINA I AT ESPLANADE LAKEWOOD RANCH
CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N15000000943

We have received your document for SARACINA I AT ESPLANADE LAKEWOOD RANCH CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 620A00025391

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: Adaracima 1 at Esplanade Lakeside Ranch Condominium Association, Inc.
- 2. The principal office address: 7300 Park St
Seminole, FL 33777
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 11/23/2015 Document number: N15000000943

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)
Pope Holy Properties Inc.
438 Interstate Ct
Lawton, FL 34240

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Lurtis D. Hamlin
1205 Manatee Ave West
P.O. Box NOT acceptable
Bradenton, FL 34240

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.

Allison Bourgo Signature of an officer or director Allison George 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] Signature of Registered Agent 3/11/2020 Date

If signing on behalf of an entity:

Typed or Printed Name

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