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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

REGISTERED AGENT CHANGE FIELDSTONE AMENITY ASSOCIATION II, INC.

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COVER LETTER

TO:

Amendment Section Division of Corporations

THE PARTY OF THE PARTY ASSOCIATION II	NC					
SUBJECT: FIELDSTONE AMENITY ASSOCIATION II, Name of Corporation	INC.					
DOCUMENT NUMBER: N15000011611						
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter	to the following:					
Government Documents Team						
Name of Contact Person						
Corporate Creations Networks Inc.						
Firm/Company 801 US Highway 1						
Address						
North Palm Beach, FL 33408						
City/State and Zip Code						
govdocs@corpereations.com						
E-mail address: (to be used for future annual report	n notification)					
For further information concerning this matter, please	call:					
Lauren Moseley	at (281)822-9170					
Name of Contact Person	at (281)822-9170 Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address:	Street Address:					
Mailing Address: Amendment Section	Amendment Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327	The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of char	provisions of sections nge is submitted for c	corporation or	ganized under	the laws of th	ne State of _	Florida	his .
1. The name of t	to change its registe	erea office or res DSTONE AMEN	•				.c,
2. The principal	10011	NE 26th Street #2	18,				
at a morbine par	•	uderdale, FL 3330	05				•
3. The mailing a	ddress (if different):						
_	ocration/qualification	12/03/2015	Docu	ıment numbe	r: <u>N</u> 1500001	1611	· · ·
5. The name and	l street address of the timent of State: (If res	current registere		gistered offic	e on file wi	th the	
	Lectair, Robert c/o L	eclair Group Inc.					
	1881 NE 26th Street	#218,			· .		
	Ft. Lauderdale, FL 3	3305					
6. The name and (if changed):	i street address of the		agent (if chang	ed) and for re	gistered off	ice	् ु ु
		Hetwork's Inc.		· ·	<u> </u>		
	801 US Highway 1		Box NOT accepts		<u>;</u>	. :	•
	North Palm Beach, F						
The street address changed will	ess of its registered of he identical.	office and the str	eet address of	the business	office of its	registere	d agent,
	as authorized by resone board, or the corp	olution duly ado oration has beer	pted by its boa i notified in w	rd of director riting of the c	rs or by an change.	officer so	1
	PYTOAN		Lauren M	loseley, Presid			
	triot in other or airctor the appointment as to comply with the p ad I am familiar with ing filed merely to re s been notified in wr	registered agen rovisions of all and accept the	t and agree to statutes relativ obligation of i	,	ed wine ind to pacity, ier and com is registered ess, I hereb		formance Or, if this that the
corporation ha	104	lting of this char lle, Special Sec			/2022		
Chw. mil	lattire of Registered Agent			· E	Oute	,	· .
If signing on be	chalf of an entity:	·"		•••••			
· · · · · · · · · · · · · · · · · · ·	yped or Printed Name	 .		. ,	• •	, i	· ·

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