N15227

. (Re	equestor's Name)	-
(Ac	ldress)	
(Ac	ldress)	
·····(Cir	ty/State/Zip/Phone	o #1)
(Cil	Grotato/Zipir Holle	• "',
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		:

Office Use Only



000261386440

06/19/14--01007--005 **35.00

14 JUN 19 PH 1: 06

C. LEWIS
JUL 7 2014
EXAMINER

300 North Maitland Ave. Maitland, Florida 32751 T | 407.539.3900 F | 407.539.0211

Attorneys at Law



Mary Ann Chandler, Esq. MChandler@likeyourlawyer.com

June 17, 2014

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Home Owners Association San Mateo Village, Inc.

Change of Registered Agent Matter No: 09449-001

Dear Sir / Madam:

Re:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations which has been properly completed by this office. Furthermore, enclosed please find a check made payable to the Florida Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed above.

Sincerely,

KATZMAN GARFINKEL

ittner.

Mary Ann Alandler, Esquire

MAC:drc Enclosures

STATEMENT OF CHAN 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 ange is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida.	
2. The principal	the corporation: Home Owners Association San Mateo Village Inc. office address: 5004 SANTA BARBARA AVENUE 5265 State 2000)
3. The mailing a	address (if different): P.O. BOX 5322. TITUSVILLE, FL 32783 5205 Syssav &	نې .
4. Date of incorp	poration/qualification: 06/03/1986 Document number: N15227	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	VON HIRSCH, FRITZ	
	5004 SANTA BARBARA AVE.	
	TITUSVILLE, FL 32789	
6. The name and (if changed):	TITUSVILLE, FL 32789 d street address of the new registered agent (if changed) and /or registered office	
	KATZMAN GARFINKEL & BERGER 고 유무	
	5297 WEST COPANS ROAD	
	P.O. Box NOT acceptable MARGATE, FLORIDA 33063	
1	ess of its registered office and the street address of the business office of its registered agent, l be identical.	
Such change wa authorized by the Signature	as authorized by esolution duly adopted by its board of directors or by an officer so he board, on the corporation has been notified in writing of the change. RECHARD J. Decow, Press Dear Printed or typed name and title	-
I hereby accept I further agree t of m) duties, an document is bei corporation has	the appoinment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed movely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.	
C Sign	prature of Degistered Agent Date	
v If signing on be	chalf of an entity:	
	Yeed or Printed Name	

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