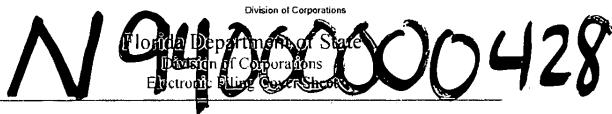
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Division of Corporations

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Phone : (954)208-0845

Fax Number

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## REGISTERED AGENT CHANGE

The Weatherly Condominiums at Central Park Association,

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 1       |
| Page Count            | 02      |
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A. BUTLER

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

| •   | •  | .0502, 607,1508, or 617,1508, Florida ,<br>rganized under the laws of the State of $_{\perp}$   |             | his                 | _                      |  |
|---|--|---|-------------|---------------------|------------------------|--|
| · <del></del>   | •  | gistered agent, or both, in the State of I  |             |                     |                        |  |
| . The name of the corporation: The Weatherly Condominiums at Central Park Association, Inc. |  |   |             |                     |                        |  |
|   |  | RIDGE ROAD ORLANDO, FL 32809-3  |             |                     |                        |  |
| ••  |  |   | _           |                     | _                      |  |
| 4. Date of incorp   | ooration/qualification: 01/19/1994   | Document number: N940000  | 000428      |                     | <u>-</u>               |  |
|   | street address of the current register<br>tment of State: (If resigned, enter res  | ed agent and registered office on file wigned)  | ith the     |                     |                        |  |
|   | LABOY, ZAIDE   |   | _           |                     |                        |  |
|   | 1649 1/2 WEST OAK RIDGE RD. O  | RLANDO, FL 32809  | SEC.        | 2022                |                        |  |
| 6. The name and (if changed):   | street address of the new registered  C T Corporation System   | agent (if changed) and /or registered of  | RETARY OF S | 022 APR 25 AM 8     | TEMO                   |  |
|   | 1200 South Pine Island Road  |   | TATE        | 8: 19               | •                      |  |
|   | P.C  | D. Box. NOT acceptable  | _           | _                   |                        |  |
|   | Plantation, Florida 33324  |   |             |                     |                        |  |
| The street addre  | ess of its registered office and the str<br>be identical.  | reet address of the business office of it   | ts register | red ager            | nt,                    |  |
| Such change wa<br>authorized by th  | is authorized by resolution duly ado<br>ie board, or the corporation has been  | pted by its board of directors or by an<br>a notified in writing of the change.   | officer so  | 0                   |                        |  |
| Žis.  | NGS_   | Lisa D. DuBois, Secretary   |             |                     |                        |  |
| I hereby accept<br>I further agree i  | the appointment as registered agen<br>to comply with the provisions of all<br>d I am familiar with and accept the<br>ne filed merely to reflect a change i | Printed or typed name and to<br>all and agree to act in this capacity,<br>stantes relative to the proper and con-<br>obligation of my position as registere<br>in the registered office address, I here<br>nge. | nnlete nei  | rformai<br>Or, if t | -<br>nce<br>his<br>the |  |
| corporation has<br>C T Corporation  |  |   |             |                     |                        |  |
| Sur   | mature of Registered Agent   | 4/25/2022<br>Date   |             |                     | _                      |  |
| -   | half of an entity:   | Date  |             |                     |                        |  |
|   | ssistant Secretary   |   |             |                     |                        |  |
|   | ped or Printed Name  |   |             |                     |                        |  |
|   | · <del>-</del>   |   |             |                     |                        |  |

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

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