

N9500005742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

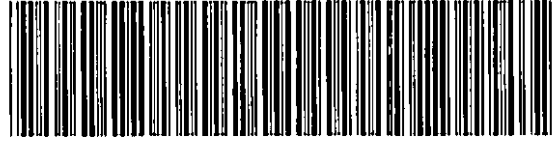
(Business Entity Name)

(Document Number)

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JUN 25 2018  
S. YOUNG

18 JUN 22 AM 9:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 5, 2018

THOMAS MCDERMOTT, ESQ  
LAW OFFICE OF THOMAS MCDERMOTT  
901 NW 8TH AVENUE STE B-17  
GAINESVILLE, FL 32601

SUBJECT: RAINBOWS FIRST ADDITION HOMEOWNERS ASSOCIATION,  
INC.  
Ref. Number: N95000005742

We have received your document for RAINBOWS FIRST ADDITION HOMEOWNERS 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):

NO FORM ENCLOSED ONLY COVER SHEET

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 718A00011683

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** RAINBOWS FIRST ADDITION HOMEOWNERS ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N95000005742

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:

**Thomas McDermott, Esq.**  
Name of Contact Person

**Law Office of Thomas McDermott**  
Firm/Company

**901 NW 8th Avenue, Suite B-17**  
Address

**Gainesville, FL 32601**  
City/State and Zip Code

**McDermott.lawyer@gmail.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Kathy Hendrickson** at ( **352** ) **375-7157**  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

RECEIVED  
18 JUN 22 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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: Rainbows First Addition Homeowners Association Inc.
2. The principal office address: 500 East University Avenue, Suite D Gainesville, FL 32601
3. The mailing address (if different): POST OFFICE BOX 357904 GAINESVILLE, FL 32635-7904
4. Date of incorporation/qualification: 12/4/1995 Document number: N95000005742
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)

Terry N. Silverman
500 East University Avenue, Suite D
Gainesville, FL 32601

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TALLAHASSEE, FLORIDA

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Thomas McDermott, Esq.
901 NW 8th Avenue, Suite B-17
Gainesville, FL 32601
P.O. Box NOT acceptable

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.

Signature of an officer or director

CHAIRMAN
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 of Registered Agent

June 19, 2018
Date

If signing on behalf of an entity:

Thomas McDermott
Typed or Printed Name

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