| (Requestor's Name) | | |
|---|--|--|
| (Address) | 500186648 | |
| (Address) | 000100010 | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | 10/14/100100400 | |
| (Document Number) | | |
| Certified Copies Certificates of Status | L A H A | |
| Special Instructions to Filing Officer: | ALLAHA SEE, FLERIBA | |
| | 121 1886 : 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 - 1887 | |
| | K | |

Office Use Only

10,14,19

675

**2310.00

And the second

PROPERTY OF THE PARTY OF THE PA

COVER LETTER

Amendment Section Division of Corporations

TO:

| SUBJECT: Am | berwood Lake Condom | inium Association, | Inc. |
|-------------------------|---|---|----------------------------------|
| DOCUMENT NUMI | BER: | 762429 | |
| The enclosed Stateme | nt of Change of Registered Office | e/Agent and fee are subm | itted for filing. |
| Please return all corre | spondence concerning this matter | to the following: | |
| _ | Michael Name of Co | | |
| _ | Bensor Firm/Co | | |
| _ | 12650 Whit | | |
| | City/State ar dracine@bens | sonsinc.com | |
| E- | mail address: (to be used for f | iture annual report noti | fication) |
| For further informatio | n concerning this matter, please o | eall: | |
| | anne Racine of Contact Person | at (239) Area Code & Dayt | 277-0718 ime Telephone Number |
| Enclosed is a \$35.00 c | heck made payable to the Depart | ment of State. | |
| | Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment S Division of C Clifton Buildi 2661 Executiv | ection orporations |

Tallahassee, FL 32301

STATEMENT OF CHANGE 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 Sta | · | |
|--|--|--|---------------|
| Florida_in orde | er to change its registered office or registered agent, or both, in the State of Flor | rida. | |
| 1. The name of | the corporation: Amberwood Lake Condominium Associa | ion the | |
| 2. The principal | office address: 12650 WHITEHALL DR | · · · · · · · · · · · · · · · · · · · | |
| Fort Myers | s, FL 33907 | | |
| 3. The mailing a | ddress (if different): 12650 Whitehall Drive | | |
| Fort Mye | ers, FL 33907 | | |
| 4. Date of incorp | poration/qualification: 3/15/1982 Document number: | 762429 | |
| | I street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned) | the | |
| | Bonita D. Vandall | | |
| | 12650 Whitehall Drive | | |
| | Fort Myers, FL 33907 | 7 . 8 | |
| 6. The name and (if changed): | I street address of the new registered agent (if changed) and /or registered office | ALLAHASSI | e Property |
| | Benson's, Inc. | | |
| | 12650 Whitehall Drive | PH I2: 03 | 1 |
| | P.O. Box NOT acceptable | | |
| | Fort Myers, FL 33907 | | |
| The street address changed will | ess of its registered office and the street address of the business office of its rebe identical. | registered agent, | |
| Such change wa authorized by th | as authorized by resolution duly adopted by its board of directors or by an of board, or the corporation has been notified in writing of the change. | fficer so | |
| Mario I A | mnn: o J GAMbuzz A re franchicer or director Printed or typed name and title | Presider | 7 |
| I hereby accept I further agree to of my duties, an document is bei | the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and completed I am familiar with and accept the obligation of my position as registered and filed merely to reflect a change in the registered office address, I hereby been notified in writing of this change. | lete performance agent. Or, if this confirm that the | |
| × | Tils Ofetton 8,9,10 | | |
| If signing on be | half of an entity: | | |
| | • | | |
| | Michael Yelton yped or Printed Name | | |

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