ND4000000113

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Ci	ty/State/Zip/Phone	9 #)
PICK-UP	☐ WAIT	MAIL
. (Ви	ısiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



100260898531

06/05/14--01025--809 **216.00

14 JUN -5 FN 13.14

RD Ch8

COVER LETTER

TO:

Amendment Section Division of Corporations

Rapallo Three Association, Inc.

Name of Corporation

N04000009113

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:

Todd B. Allen, Esq.

Name of Contact Person

Lindsay & Allen, PLLC

13180 Livingston Road, Suite 201

Naples, FL 34109

City/State and Zip Code

gm@rapallo.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Todd Allen

Name of Contact Person

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

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

statement of char	orovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
	ne corporation: Rapallo Three Association, Inc.
2. The principal of	office address: 8551 Via Rapallo, Estero, FL 33928
3. The mailing ac	ddress (if different): See principal address
4. Date of incorp	oration/qualification: 9/23/2004 Document number: N0400009113
5. The name and	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
	Todd B. Allen, Esq.
	8950 Fontana Del Sol Way
	Naples, FL 34109
6. The name and (if changed):	Naples, FL 34109 street address of the new registered agent (if changed) and /or registered office
	Todd B. Allen, Esq.
	13180 Livingston Road, Suite 201
	Naples, FL 34109
The street address changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Signatur	TOWN GARLINES BIALD THE appointment as registered agent and agree to act in this capacity TOWN GARLINES BIALD Printed or typed name and title MEABER
I pereby accept a I further agree to performance of	the appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete my shiften and I am familiar with and accept the obligation of my position as registered afford many tipe to reflect a change in the registered office address, I want the corporation has been notified in writing of this change.
•	nature of Registered Agent Date
If signing on bel	nalf of an entity:
Ту	ped or Printed Name

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