N00000000565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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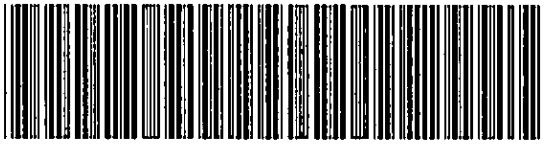

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MEDITERRA COMMUNITY ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N00000000565

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:

Thoams B. Hart, Esq.
Name of Contact Person

Knott Ebelini Hart
Firm/Company

1625 Hendry St., Third Floor
Address

Fort Myers, FL 33901
City/State and Zip Code

THart@Knott-Law.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas B. Hart at (239) 334-2722
Name of Contact Person — Area Code & Daytime Telephone Number

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: MEDITERRA COMMUNITY ASSOCIATION, INC.

2. The principal office address: 15735 Corso Mediterra Circle, Naples, FL 34110

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 01/28/2000 Document number: N00000000565

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)

Timothy Richards

15735 Corso Mediterra Circle, Naples, FL 34110

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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 B. Hart, Esq.

Knott Ebelini Hart

P.O. Box NOT acceptable

1625 Hendry St., Third Floor, Fort Myers, FL 33901

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.

Rodney Chase

Signature of an officer or director

RODNEY CHASE PRESIDENT MCA

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.

Thomas B. Hart

Signature of Registered Agent

12-6-2021

Date

If signing on behalf of an entity:

_____

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)