

718507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300414195703

08/21/23--01028--005 **35.00

2023 08 21 10:42

2023 08 21

**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: Atlantis Golf Club, Inc.
2. The principal office address: 301 Orange Tree Drive, Atlantis, FL 33462

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/14/1970 Document number: 718507

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)

Fernandes, Kathleen

101 Turnberry Drive

Atlantis, FL 33462

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

c/o Becker & Poliakoff, P.A.

759 SW Federal Highway, Suite 213

P.O. Box NOT acceptable

Stuart, Florida 34994

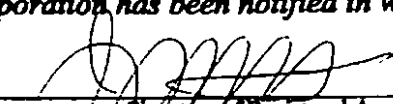
The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

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

FREDERICK L. GRAVEL BOAK
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

8/16/2023
Date

If signing on behalf of an entity:

Jane Cornett
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE