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(City/State/Zip/Phone #)	<del></del>
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PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Shadybrook Village Durons Ossar ration
DOCUMENT NUMBER: 724981
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:
Kelly A. Moran
Resource Property Management
7300 Park Street
Seminole, FL 33777  City/State and Zip Code
kmoran@resourcepropertymgmt.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kelly A. Moran  Name of Contact Person  Area Code & Daytime Telephone Number
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 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 Anadapasch Italiage Junear Usaciation 2. The principal office address: 7300 Park Street, Seminole, FL 33777	<u>_h</u> c	-
3. The mailing address (if different):		
4. Date of incorporation/qualification: 12/13/193 Document number: 724981	<del></del>	
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)		
Gindsay, John P 955 Buron Bras	SE	2018
danavala, FL 31243	AHA	٦٤
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	SSE	18
Najores Thompson, P.L.	Or S	PH 12:
MOI 8th avenue West	ORIG ORIG	2:4
Bradenton, FL 34205	2.	G
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 buard, or the corporation has been notified in writing of the change.		
Signature of an officer or director Trinsed or typed name and title	•	
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 overformance 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 6/26/18		
f signing on behalf of an entity:		
KILHARD A WELLER Typed or Printed Harne		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CURPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E043 (03/12)

\* \* \* FILING PEE: \$35.00 \* \* \*