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Division of Surporations

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TB 11 AM 9:34

REGISTERED AGENT CHANGE

SUNSET GROVE CONDOMINIUM ASSOCIATION, INC.

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Sign	
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By:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Si m organized under the laws of the State of <mark>Fl</mark>	orida	,s
		or registered agent, or both, in the State of Fl	orida.	
1. The name of t	the corporation: Sunset Grove Cor	ndominium Association, Inc.		
2. The principal	office address: 24701 US HWY 19	9 NORTH, SUITE #102, CLEARWATER, FL.	33763	
- 3. The mailing a	iddress (if different):			
4. Date of incorp	poration/qualification: 04/26/1973	Document number: 726244		
5. The name and		stered agent and registered office on file with		
	BROWDER, KAREN			
	24701 US HWY 19 NORTH, SUE	TE #102		
	CLEARWATER, FL 33763			
6. The name and (if changed):	I street address of the new registe	red agent (if changed) and /or registered offic	Je	
	C T Corporation System			2022
	1200 South Pine Island Road		F	2022 FEB =
		P.O Box NOT acceptable	主角	
	Plantation, Florida 33324		SSC	A I
The street addre	ess of its registered office and the be identical.	e street address of the business office of its	registered	
Such change wa authorized by th	is authorized by resolution duly ne board, or the corporation has l	adopted by its board of directors or by an obeen notified in writing of the change.	fficerso	<u> </u>
Sjû De	JB.	Lisa D. DuBois, Secretary		
Signatu	re of an officer or director	Printed or typed name and title		
I Juriner agree i of my duties, an document is hei corporation has	to comply with the provisions of d I am familiar with and accept ng filed merely to reflect a chang been notified in writing of this c	gent and agree to act in this capacity, all statutes relative to the proper and comp the obligation of my position as registered of ge in the registered office address, I hereby change.	lete perfoi agent. Or confirm t	rmance of this hat the
C T Corporation	System Kll	2/1/2022		
Sign	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Tracy Kellner	, Assistant Secretary			
T)	ped or Printed Name	_		

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