(Requestor's Name)	
(Address)	300304138
(Address)	300304130
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	10/10/1701009
(Document Number)	
Certified Copies Certificates of Status	- <del> </del>
Special Instructions to Filing Officer:	
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Office Use Only	



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C. GOLDEN OCT 1 0 2017

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
LESLIE ESTATES HOMEOWNERS' ASSOCIATION NO. 3	, INC
Name of Corporation	
DOCUMENT NUMBER: 727887	
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	
Carla A. Jones	
Name of Contact Person	
Law Office of Carla Jones	, P.A.
Firm/Company	
550 NE 124th Street	
Address	
North Miami, FL 33161	
City/State and Zip Code	
carla@cjlawoffices.com	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please call:	
Carla A. Jones 786	,378-8243
Name of Contact Person Area Code	& Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.	
Amendment Section Amend Division of Corporations Division P.O. Box 6327 Cliftor Tallahassee, FL 32314 2661 F	Address:  Iment Section  on of Corporations  Building  Executive Center Circle
Tallah	assee, FL 32301

CR2E045 (03/12)

## 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 natement of change is submitted for a corporation organized under the laws of the State of	Statutes, this Florida
in order to change its registered office or registered agent, or both, in the State of	Florida.
. The name of the corporation: LESLIE ESTATES HOMEOWNERS' ASSOCIAT	FION NO. 3, INC.
2. The principal office address: 8211 W Broward Blvd PH1 Plantation, FL 33324	
3. The mailing address (if different):	<u> </u>
4. Date of incorporation/qualification: 10/29/1973 Document number: 7278	87
<ol><li>The name and street address of the current registered agent and registered office on file Florida Department of State: (If resigned, enter resigned)</li></ol>	with the
Walton, Kenneth Ell	_
550 NE 124 Street	
North Miami, FL 33161	<b></b>
<ol> <li>The name and street address of the new registered agent (if changed) and /or registered (if changed);</li> </ol>	office
Law Office of Carla Jones, P.A.	_
550 NE 124th Street	_
North Miami, FL 33161	<b></b> -
The street address of its registered office and the street address of the business office of as changed will be identical.	its registered agent.
Such change was authorized by resolution duly adopted by its board of directors or by authorized by the board, or the compration has been notified in writing of the change.  Shipley  Springs or typed name and	1
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 of performance of my duties, and I am familiar with and accept the obligation of my pastingent. Or, if this document is being filed merely to reflect a change in the registered of hereby confirm that the corporation has been notified in writing of this change.  Signatural perfected Agent	
If signing on behalf of an entity:  Car (c. Jan.)  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, FI. 32314 CR2E045 (03/12)