

729073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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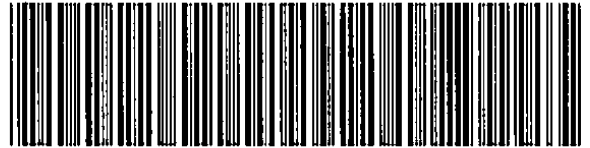
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 JUN 29 PM 3:47

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JUN 17 2020

1 ALBERTON

**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: Ben Mar Condominium Associations, INC
2. The principal office address: I/C of Noack & Company 12610 World Plaza Lane #1 Fort Myers, FL 33907
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/13/1974 Document number: 729073
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)

Sapp, Pauls L

P & M Property Management

2830 Winkler Ave Unit 101 Ft Myers, FL 33916

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

Janet Noack, CPA Noack & Company LLC


12610 World Plaza Lane #1

P.O. Box NOT acceptable

Fort Myers, FL 33907

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

Timothy Coons, Treasurer

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

5/27/2020

Date

If signing on behalf of an entity:

Janet Noack, CPA

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)