## 732786

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Jennifer L. Biletnikoff, Esq. Shareholder Board Certified Specialist, Condominium and Planned Development Law Phone: 239:552.3203 Fax: 239.263.1633 jhiletnikoff a beckerlawyers.com



Becker & Poliakoff 4001 Tamiami Trail North, Suite 270 Naples, F1, 34103

1819 Main Street, Suite 905 Sarasota, FL 34236

September 13, 2024

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Re: Change of Registered Agent for Naples Bath and Tennis Club, Unit H. Inc.

Document Number 732786

Client/Matter No. N31691-419246

## Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations, along with a check in the amount of \$35.00 for the filing fee.

Should you have any questions, please feel free to contact me.

Sincerely,

Jennifer L. Biletnikoff, Esquire

Gennifer Bleanuagy

Shareholder For the Firm

JLB/mb

Enclosure (as stated)

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

•	•	517.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of Florida	
in order to ch	ange its registered office or	registered agent, or both, in the State of Florida.	
1. The name of the cor	poration: Naples Bath and T	ennis Club, Unit H, Inc.	
2. The principal office	address		
% Complete	Property Manager	net of SWFL 3050 N Horseshoe dr # 172 Naples, FL 3410	
		Document number: 732786	
	address of the current regis of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
Resor	t Management		
2685	2685 Horseshoe Drive S., Suite 215		
Naple	Naples, FL 34104		
6. The name and street (if changed):	address of the new register	red agent (if changed) and /or registered office	
Becke	Becker & Poliakoff, P.A.		
4001 Tamiami Trail N., Suite 270  P.O. Box NOT acceptable			
			Naple
The street address of i	ts registered office and the	e street address of the business office of its registered agent,	
Such change was auth authorized by the boa	orized by resolution duly and, or the corporation has b	adopted by its board of directors or by an officer so occur notified in writing of the change.	
Barbara Ma	as	Barbara Maas, President	
		Printed or typed name and litte	
I further agrée to com of my duties, and I am document is being file	ply with the provisions of a familiar with and accept t	gent and agree to act in this capacity. all statutes relative to the proper and complete performance the obligation of my position as registered agent. Or, if this ge in the registered office address, I hereby confirm that the change.	
Crennika Edistrikal		9/13/2024	
Signature of Registered Agent		Date	
If signing on behalf or	f an entity:		
Jennifer L. Biletnikoff,	Esquire		
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)