

739427

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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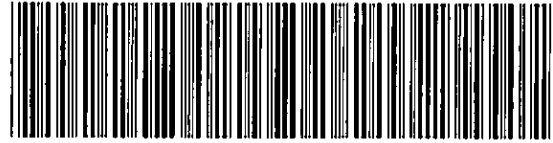
(Business Entity Name)

(Document Number)

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2024 JUL 10 PM 4:22
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Summer Green Condominium Association
Name of Corporation

DOCUMENT NUMBER: 739427

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:

PAULA MITCHELL
Name of Contact Person

MITCHELL ASSOCIATION MANAGEMENT GROUP, LLC
Firm/Company

5942 PALMER BLVD.
Address

SARASOTA, FL 34232
City/State and Zip Code

Paula@mitchellscq.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paula Mitchell at (941) 870-2300
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: Summer Green Condominium Association, Inc.
2. The principal office address: c/o Mitchell Association Management Group, LLC,
5942 Palmer Blvd., Sarasota, FL 34232
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/17/1977 Document number: 739427
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)

Resigned

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DIVISION OF STATE
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Paula Mitchell
Mitchell Association Management Group, LLC
P.O. Box NOT acceptable
5942 Palmer Blvd., Sarasota, FL 34232

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.

Allen F. Wert
Signature of an officer or director

ALLEN F. WERT
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.

Paula Mitchell
Signature of Registered Agent

June 20, 2024
Date

If signing on behalf of an entity:

Typed or Printed Name

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