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S. YOUNG

COVER LETTER

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O: Amendment Section Division of Corporations				
Siesta Dunes Condominium Association, Inc.				
Name of Corporation				
OCUMENT NUMBER: 742237				
ne enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
ease return all correspondence concerning this matter to the following:				
Kevin T. Wells, Esq.				
Name of Contact Person				
Law Offices of Wells Olah, P.A.				
Firm/Company				
1800 2nd Street, Suite 808				
Sarasota, Florida 34236				
City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
or further information concerning this matter, please call:				
Kevin T. Wells, Esq. at (941) 366-9191 Name of Contact Person Area Code & Daytime Telephone Numb				
Name of Contact Person Area Code & Daytime Telephone Numb	ег			
nclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Street Address:				
Amendment Section Amendment Section Division of Corporations Division of Corporations				
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building				

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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 Statutes, this tatement 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.	-
. The name of the corporation: Siesta Dunes Condominium Association, Inc.	
The principal office address: 6200 Midnight Pass Road, Sarasota, Florida 34242	
	·
. The mailing address (if different): Same	
Date of incorporation/qualification: 03/29/1978 Document number: 742237	
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)	
McClenathen, Chad M	
783 S. Orange Avenue, #210	
Sarasota, Florida 34236	TI TI
i. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	rn D
Kevin T. Wells, Esq. c/o Law Offices of Wells Olah, P.A.	ì
1800 2nd Street, Suite 808	
P.O. Box NOT acceptable Sarasota, Florida 34236	
The street address of its registered office and the street address of the business office of its registered age is changed will be identical.	nt,
Such change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.	
Julle John Goldener	_
Asignature of an officer or director Printed or typed name and title thereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete verformance 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 lereby confirm that the corporation has been notified in writing of this change. 1] - 2 - 18 Signature of Registered Agent Date Dat	_
f signing on behalf of an entity:	

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