743964

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	:





800283793398

800283793390 04/25/16--01033--023 **35.00



4/2202

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Woods of Rolling Hills Homeowners' Association, Inc.
Name of Corporation
DOCUMENT NUMBER: 743964
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:
Lee Ballard, Esq.
Name of Contact Person
Tucker & Tighe, PA
Firm/Company
800 E. Broward Blvd., Ste. 710
Address
Fort Lauderdale, FL 33301
City/State and Zip Code
law@tuckertighe.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kristina Trujillo Name of Contact Person at (954) 467-7744 Area Code & Daytime Telephone Number
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 Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Woods of Rolling Hills Homeowners' Association, Inc.
•	office address: c/o Miami Management, Inc. vgrass Corporate Parkway, Sunrise, FL 33323
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 8/17/1978 Document number: 743964
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Stralley & Otto, PA
	2699 Stirling Road, Suite C207
	Fort Lauderdale, FL 33028
6. The name and (if changed):	Stralley & Otto, PA 2699 Stirling Road, Suite C207 Fort Lauderdale, FL 33028 street address of the new registered agent (if changed) and /or registered office Tucker & Tighe, PA
	Tucker & Tighe, PA
	800 E. Broward Boulevard, Suite 710
	P.O. Box NOT acceptable Fort Lauderdale, FL 33301
	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatu	E V O NAY CISSE PVES Printed by typed name and title
I hereby decept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sig	Ball 3/22/16 nature of Registered Agent Date
If signing on be	half of an entity:
Tucke	rt Tighe, P.A. yped or Printed Name

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