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COVER LETTER

TO: Amen

Amendment Section Division of Corporations

SUBJECT: NORMANDY G ASSOCIATION, INC.

Name of Corporation

DOCUMENT NUMBER: 59-

59-1998546 - 14674

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:

TAMMY WILSON

Name of Contact Person

WILSON LANDSCAPING & MANAGEMENT CORP.

Firm/Company

1300 NW 17TH AVE. SUITE 270

Address

DELRAY BEACH, FL 33445

City/State and Zip Code

TAMMY@WILSONMANAGEMENT.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TAMMY WILSON

_{..},561

637-3402

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

M.

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

statement of cha	provisions of sections 607.0502, 617.05 ange is submitted for a corporation orgo r to change its registered office or regis	anized under the laws of the State of <u>F</u>	LORIDA	-
1. The name of	the corporation: NORMANDY G	ASSOCIATION, INC.		
2. The principal	office address: 1300 NW 17TH A	AVE. SUITE 270		
	address (if different): SAME - MOV	ING 4/27/15 TO ADDRESS	ABOVE	
4. Date of incor	poration/qualification: 4/17/79	Document number: 746768	}	
	d street address of the current registered rtment of State: (If resigned, enter resign		h the	
	DANNY L WILSON			
	4723 W ATLANTIC AVE A-	19		
	DELRAY BEACH, FL 33445	5		
6. The name and (if changed):	d street address of the new registered ag	gent (if changed) and /or registered offi	15 MAY	SECRE TALLAH
	DANNY L. WILSON			FIL ASSI
	1300 NW 17TH AVE. SUIT	E 270	PH	
		OT acceptable	ណ ភូ	STAT LORI
	DELRAY BEACH, FL 33445		9	DÆ E
The street address changed will	ess of its registered office and the stree be identical.	et address of the business office of its	registered age	ent,
	Y	ed by its board of directors or by an on open change. Stephen (VC15)	fficer so	_
I hereby accept	the appointment as registered agent a to comply with the provisions of all sta my duties, and I am familiar with and is document is being filed merely to re that the corporation has been notified	ntutes relative to the proper and comp accept the obligation of my position flect a change in the registered office in writing of this change.	olete as registered a address, I	
Da	uh	4-24-15		_
<i></i>	partire of Registered Agent	Date		
DANNY L.	•			
	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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