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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| , , |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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| J. HORNE APR 24 2024 |
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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: HIDDEN PINES HOMEOWNERS ASSOCIATION, INC. Name of Corporation DOCUMENT NUMBER: 746812 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: Scott J. Lee, Esq. Name of Contact Person SJW Law Group, PLLC Firm/Company 12300 South Shore Boulevard, Suite 202 Address Wellington, Florida 33414 City/State and Zip Code Scott@sjwlawgroup.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 340-4555 Area Code & Daytime Telephone Number Scott J. Lee, Esq. Name of Contact Person 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

CR2E045 (04/13)

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 inge is submitted for a corporation organized under the laws of the State of Florida registered of change its registered office or registered agent, or both, in the State of Florida. |
|--|---|
| 1. The name of | the corporation: HIDDEN PINES HOMEOWNERS ASSOCIATION, INC. |
| | office address: CMC MANAGEMENT, 2950 JOG ROAD, GREENACRES, FLORIDA 33467 |
| 3. The mailing a | address (if different): SAME |
| | poration/qualification: 04/19/1979 Document number: 746812 |
| 5. The name and Florida Depar | street address of the current registered agent and registered office on file with the street of State: (If resigned, enter resigned) |
| | WYANT-CORTEZ & CORTEZ |
| | 860 US HIGHWAY ONE, SUITE 108 |
| | NORTH PALM BEACH, FL 33408 |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office |
| | SJW LAW GROUP, PLLC |
| | 12300 SOUTH SHORE BLVD, SUITE 202 |
| | P.O. Box NOT acceptable |
| | WELLINGTON, FLORIDA 33414 |
| The street addre as changed will | P.O. Box NOT acceptable WELLINGTON, FLORIDA 33414 Wellington, Florida and the street address of the business office of its registered agents be identical. Sa authorized by resolution duly adopted by its board of directors or by an officer so its board, or the corporation has been notified in writing of the change. |
| Jaliuca Signatur | Printed or typed name and title |
| I hereby accept I further agree I of my duties, an document is bei corporation has | the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change. |
| | aty Ly March 11, 2024 |
| If signing on be | half of an entity: |
| | ped 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 * * *

CR2E045 (04/13)