747834

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	417
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

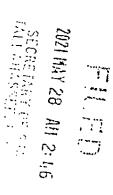
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COVER LETTER

TO:	Amendment Section Division of Corporations	
	ECT: North Pointe Home Owners Association of Corporation	n of Aubumdale, Florida, Inc.
DOCU	EMENT NUMBER: 747834	<u> </u>
The en	closed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	matter to the following:
NICHO	PLAS P. MERRIWEATHER, ESQ.	
Name o	of Contact Person	
SANOR	BA LAW FIRM	
Firm/C	ompany	
422 S. 1	FLORIDA AVENUE	
Addres	S	
LAKEI	LAND, FL 33801	
City/St	ate and Zip Code	
	Nick@sanoba.com	
E-mail	address: (to be used for future annual	report notification)
For fur	ther information concerning this matter, p	please call:
Nichola	cholas Merriweather at (863) 683-5353 Name of Contact Person Area Code & Daytime Telephone Number	
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Amenament Section Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04-13)

Tallahassee, FL 32314

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

Pursuant to the provisions of sections 607.0502, 61 statement of change is submitted for a corporation in order to change its registered office or	organized under the laws of the State of Florid	da		
1. The name of the corporation: North Pointe Home	Owners Association of Auburndale, Florida, Inc	:.		
2. The principal office address: 422 S. FLORIDA AV				
3. The mailing address (if different): P.O. BOX 172	L AUBURNDALE, FL 33823			
 3. The mailing address (if different): P.O. BOX 172 4. Date of incorporation/qualification: 06/27/1979 	Document number: 747834			
5. The name and street address of the current register. Florida Department of State: (If resigned, enter re-	ered agent and registered office on file with th			
DARREL LAKE				
105 SOUTH COURT				
AUBURNDALE, FL 33823		202 SE FAL		
AUBURNDALE, FL 33823 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
NICHOLAS P. MERRIWEATHER.	. ESQ.			
422 S. FLORIDA AVENUE		// 2: 4: (F) (F)		
				
LAKELAND, FL 33801				
The street address of its registered office and the sas changed will be identical.	street address of the business office of its reg	gistered agent,		
Such change was authorized by resolution duly acauthorized by the board, or the corporation has be	dopted by its board of directors or by an officen notified in writing of the change.	cer so		
Kes Signature of an other or disjector	Revin Musicay Pre	SidenT		
I hereby accept the appointment as registered age I further agree to comply with the provisions of a of my duties, and I am familiar with and accept the document is being filed merely to reflect a change corporation has been notified in writing of this ch	ll statutes relative to the proper and complet he obligation of my position as registered ag e in the registered office address, I hereby co	rent. Or. if this		
Signature of Regishered Agent	Date			
If signing on behalf of an entity:				
Fyped or Printed Name				

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 4.13

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