## 

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09/27/21--01008--024 \*\*35.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations	•
SUBJECT: Tortoise Island Homeowner's Assoc Name of Corporation	ciation, Inc.
DOCUMENT NUMBER: 747841	
The enclosed Statement of Change of Register	red Office/Agent and fee are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
John L. Soileau	
Name of Contact Person	······································
Watson, Soileau, DeLeo & Burgett, PA	
Firm/Company	<del></del>
3490 North U.S. Highway I	
Address	<u> </u>
Cocoa, Ft. 32926	
City/State and Zip Code	
jsoileau@brevardlawgroup	n.com
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this matter	r, please call:
Jan Lambert-Straits	at ( 321 ) 631-1550
Name of Contact Person	at ( 321 ) 631-1550  Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to t	he Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## 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 Statute inge is submitted for a corporation organized under the laws of the State of <u>Florida</u> ir to change its registered office or registered agent, or both, in the State of Florida	<u> </u>	
1. The name of I	the corporation:Tortoise Island Homcowner's Association, Inc.		
2. The principal	office address: 727 Loggerhead Island Dr., Satellite Beach, FL 32937		
	address (if different):		
4. Date of incorp	poration/qualification: 6/28/1979 Document number: 747841		
5. The name and	d street address of the current registered agent and registered office on file with the thment of State: (If resigned, enter resigned)		
	Tortoise Island Homeowners Association		
	727 Loggerhead Island Dr.	2021 SEP SECALD	
	Satellite Beach, FL 32937	SEP 2	<u> </u>
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	7 AMII:	
	John L. Soileau	- π - ω - ω - ω - ω - ω - ω - ω - ω - ω	
	3490 North U.S. Highway I	,, ∞	40
	P.O. Box NOT acceptable		
	Cocoa, FL 32926		
The street address changed will	ess of its registered office and the street address of the business office of its regis be identical.	stered agent,	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an office ne board, or the corporation has been notified in writing of the change.	r so	
	re of an officer or director  Printed or typed name and title	Preside	-a T
			,
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity.  The comply with the provisions of all statutes relative to the proper and complete in a familiar with and accept the obligation of my position as registered agent in a filed merely to reflect a change in the registered office address. I hereby confished in writing of this change.	performance it. Or, if this firm that the	
	9/17/702/		
Sig	nature of Registered Agent Date		
If signing on be	chalf of an entity:		
T	yped or Printed Name		

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