

747841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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FILED
2024 AUG 30 PM 3:11
SECRETARY OF STATE
411 AUGUST 31 09PM

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Tortoise Island Home Owners Association, Inc.
2. The principal office address: 727 Loggerhead Island Dr.
Satellite Beach, FL 32937
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6/28/1979 Document number: 747841
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Soileau, John L.
3490 North US Highway 1
Cocoa, FL 32926

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Carreja, Luis
3490 North US Highway 1
Cocoa, FL 32926

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SECRETARY OF STATE
TALLAHASSEE, FL 32314

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Leslie Pankey
Signature of an officer or director

Leslie Pankey - Secretary
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)