749705

(Requestor's Name)	_
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	
Certified Copies Certificates of Status	
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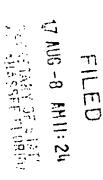


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S. TALLENT AUG 1 4 2017

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COVER LETTER

Division of Corporations

SUBJECT: BAYBERRY HOMEOWNER'S ASSOCIATION, INC.

Name of Corporation

DOCUMENT NUMBER: 749705

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:

Randall K. Roger & Associates, P.A.

Firm/Company
621 NW 53rd St, Suite 300

Address

Boca Raton, FL, 33487
City/State and Zip Code

knuckolls@randallkroger.com

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

For further information concerning this matter, please call:

Katherine C. Nuckolls

Name of Contact Person

Name of Contact Person

at (561) 988-5598

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

TO:

Amendment Section

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

statement of c	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of Florida refer to change its registered office or registered agent, or both, in the State of Florida.	
1. The name o	of the corporation: BAYBERRY HOMEOWNER'S ASSOCIATION, INC.	
	pal office address: Landmark Management services. Inc. W 150th Avenue Pembroke Pines, FL 33028	
3. The malting	ng address (if different):	
4. Date of inco	corporation/qualification: 11/07/1979Document number: 749705	
5. The name as Florida Dep	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	
	Randall K. Rogers & Associates, P. A.	
	4800 N S.R. 7 STE 105	4
	LAUDERDALE LAKES, FL 33319	AUG-
6. The name ar (if changed)	and street address of the new registered agent (if changed) and /or registered office	-8 AH II: 24
	Randall K. Roger & Associates, P.A.	 :
	621 NW 53rd St, Suite 300	`` <i>=</i>
	Boca Raton, FL, 33487	
The street addr as changed wil	dress of its registered office and the street address of the business office of its registered agent, ill be identical.	
Such change wanthorized by	was sutherized by resolution july adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Sigual	FRANCESCO APA S attire of an officer or director (Printed or typed frame and till o	
I hereby accep I further agree performance o agent. Or, if it hereby confirm	pt the appointment as registered agent and agree to act in this capacity, is to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as registered this document is being filed merely to reflect a change in the registered office address, I m that the corporation has been notified in writing of this change.	
Kather	Signature of Registered Agent 8/2/2017 Date	
If signing on b	behalf of an entity:	
Kalher	orte Huckolls	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARIMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

Typed or Printed Name