749842

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TO:

Amendment Section

Division of Corporations

SUBJECT: JACARANDA WEST UNITS 31 & 32 HOMEOWNERS' ASSOCIATION, INC. Name of Corporation DOCUMENT NUMBER: 749842 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: Shana J. Shields Name of Contact Person Law Offices of Wells | Olah | Cochran, P.A. Firm/Company 3277 Fruitville Road, Building B Address Sarasota, FL 34237 City/State and Zip Code kwells@kevinwellspa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Shana J. Shields 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

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this mge is submitted for a corporation organized under the laws of the State of Florida
in orde	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: JACARANDA WEST UNITS 31 & 32 HOMEOWNERS' ASSOCIATION, INC.
	office address: 1725 N. Gondola Ct., VENICE, FL 34293
3. The mailing a	nddress (if different): 2357-3 SOUTH TAMIAMI TRAIL, PMB 196, VENICE, FL 34293
	poration/qualification: 11/19/1979 Document number: 749842
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	THE LAW OFFICES OF KEVIN T. WELLS, P.A.
	1800 SECOND STREET SUITE 808
	SARASOTA, FL 34236
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Law Offices of Wells Olah Cochran, P.A.
	3277 Fruitville Road, Building B
	P.O. Box NOT acceptable
	Sarasota, FL 34237
The street addreas changed will	ess of its registered office and the street address of the business office of its registered agent be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatu	e of an officer or director 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. To comply with the provisions of all statutes relative to the proper and complete performance of an familiar with and accept the obligation of my position as registered agent. Or, if the negligible of the property to reflect a change in the registered office address, I hereby confirm that the feen notified in writing of this change.
4	11/4/2021
, 5	nature of Regissared Agent Date
If signing on be	half of an entity:
Kevin T. Wells	
Ty	ped or Printed Name

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