## 752266

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2014

Natalie B. DeVicente Southern Roots Realty LLC 1500 Fourth Street North St. Petersburg, FL 33704

SUBJECT: CASA SIERRA CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 752266

We have received your document for CASA SIERRA CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 414A00020172

Please see attache Please call me with any 91 727-409-2891 Patalie Delicente

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Casa Sierra Condominium Association Inc.
DOCUMENT NUMBER: 752266
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:
Natalie B De Vicente Name of Contact Person
Southern Routs Realty, UC
1500 Fourth Sweet North
St. Peterslawa, FL 33704 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at 727, 498-1673  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:

## 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 \( \subseteq \tau \) \( \cappa \) \( \capp
1. The name of the corporation: Cusa Serva Condaminium Association in
2. The principal office address: 88 10 N. Homes 1 the Stute 328  Tampa, FC 33614
3. The mailing address (if different):
seme as above
4. Date of incorporation/qualification: 5/1/1980 Document number: 752266
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)
DEDPORED Barnes Walker Guetre a Hounhow
3119 manatee Ave West
Bradenton, FC 34205
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Steeled Agent & Southern Roots Roots Roots Roots Roots
talie 1500 Fourth Street NWTh P.O. Box NOT acceptable
St. Returbug, FL 33704.
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.
Latelle Bolloute NATALLE B. DEVICENTE Signature of art of the color of
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.
Latalup Devicente Spenbu 2,2014 Signature of Registered Agent
If signing on behalf of an entity:
Typed or Printed Name
**

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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