

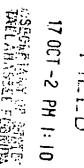
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| Special Instructions to Filing Officer: |
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David G. Muller, Esq.

Shareholder

Phone: (239) 552-3200 Fax: (239) 263-1800

dmuller@bplegal.com

4001 Tamiami Trail North Suite 410 Naples, Florida 34103

September 28, 2017

Amendment Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314

Change of Registered Agent for Limetree Beach Resort Condominium Association, Inc. Re:

Document Number 754427

Client/Matter No. L07823-225241

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations, along with a cheek in the amount of \$35.00 for the filing fee.

Should you have any questions, please feel free to contact me.

Sincerely,

David G. Muller, Esquire

7m.02

Shareholder For the Firm

DGM/ms

Enclosures (as stated)

ACTIVE E07823/225241;10135611-1

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

| statement of che | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stati ange is submitted for a corporation organized under the laws of the State of <mark>Flori</mark> er to change its registered office or registered agent, or both, in the State of Flori | da | | |
|---|--|-------------------------------|------------|--|
| 1. The name of | the corporation: Limetree Beach Resort Condominium Association | tion, Inc | C. | |
| 2. The principal | Loffice address: 1050 Ben Franklin Drive, Sarasota, FL 34236 | | | |
| | | | | |
| 3. The mailing a | address (if different): | | | |
| 4. Date of incor | poration/qualification: 10/01/1980 Document number: 754427 | | | |
| | d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned) | he | | |
| | Griffin, Shawn | | | |
| | 1050 Ben Franklin Drive | | 17 O | |
| | Sarasota, FL 34236 | | CT2 | |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office | | PH T: | |
| | Becker & Poliakoff, P.A. | | 6 0 | |
| | 6230 University Parkway, Suite 204 | | | |
| | P.O. Box NOT acceptable Sarasota, FL 34240 | | | |
| | | | | |
| The street address changed will | ess of its registered office and the street address of the business office of its reg I be identical. | gistered a _t | gent. | |
| | as authorized by resolution duly adopted by its board of directors or by an office he board, or the corporation has been notified in writing of the change. | er so | | |
| | Thomas DeAgostino, Presi | dent | | |
| I further agrée performance of agent. Or, if th | t 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 complet I my duties, and I am jamiliar with and accept the obligation of my position as its document is being filed merely to reflect a change in the registered office ac What the corporation has been notified in writing of this change. | 'e registered ldress, 1 | :l | |
| Sign | gnature of Registered Agent Page | | | |
| • | ehalf of an entity: | | | |
| David G. M | fuller, Esquire | | | |
| | Typed or Printed Name | | | |