## 755467

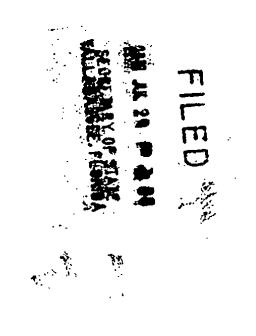
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## **COVER LETTER**

	nent Section of Corporations		
SUBJECT:	ha Flayita Conde	ominium Association, Inc	
DOCUMENT NUMBER: 755467			
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:			
	Liz Andride  Name of Conta  A Paradise Prop  Firm/Com  5201 Gulf To  Addre  Holmes Beac  City/State and  Appm @ Paradise  E-mail address: (to be used for fut	Dr. Ss  L. H. 34217 Zip Code	
For further infor	mation concerning this matter, please ca	11:	
Nz A	ndrides Jame of Contact Person	at ( 941 ) 778-4800 Area Code & Daytime Telephone Number	
Enclosed is a \$3	5.00 check made payable to the Departm	ent of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## 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: La PLayita Condominium Association, Inc
2. The principal office address: 3801 NT Aue, Holmes Beach, Fl. 342
3. The mailing address (if different): 5201 Gulf Drive, Holmes Beach, FH. 3
4. Date of incorporation/qualification: 12/9/1980 Document number: 755467
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)
Jeff Richardson
6400 Manatar Aug West Scrite F
Bradenton, Fl. 34209
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
5201 Gulf Dr. P.O. Box NOT acceptable
5201 Gulf Dr.
P.O. Box NOT acceptable
Holmes Beach, H. 342175
The street address of its registered office and the street address of the business of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors of an afficer so authorized by the board, or the corporation has been notified in writing of the charge.
Signature of an officer or director  Rick Section  Printed or typed name and title
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 werely confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent Date
f 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 CR2E045 (03/12)

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