

766294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

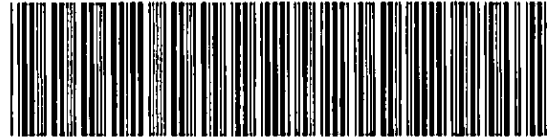
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2017-OCT 23 AM 10:45

OCT 27 2017



CSC - WILMINGTON  
251 Little Falls Drive  
Wilmington De 19808

800-927-9800  
302-636-5454 FAX

2017 OCT 23  
AH 10:18

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper      ami.casper@cscglobal.com

Date: October 18, 2017

Order#: 750938/039

Re: THE SANIBEL COTTAGES CONDOMINIUM ASSOCIATION, INC.

Enclosed please find:

XX      Change of Registered Agent and Office.

XX      Check in the amount of \$35.

Please take the following action:

XX      File in your office on a routine basis.

XX      Issue Proof of Filing.

XX      Return Regular Mail in the enclosed envelope.

Attn: Ami Casper  
c/o Corporation Service Company  
251 Little Falls Drive  
Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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: THE SANIBEL COTTAGES CONDOMINIUM ASSOCIATION, INC.

2. The principal office address: 2341 West Gulf Drive, Sanibel, FL 33957

3. The mailing address (if different): 1509 Periwinkle Way, Sanibel, FL 33957

4. Date of incorporation/qualification: 12/27/1982 Document number: 766294

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)

Hilton Grand Vacations Management, LLC

6355 Metrowest Boulevard, Suite 180

Orlando, FL 32835

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

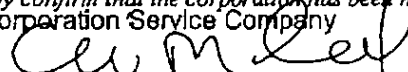
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Hans DeVaughn, President

Printed or typed name and title

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.

By:   
Signature of Registered Agent

10/18/2017

Date

If signing on behalf of an entity:

Ami M. Casper, Asst. Vice President

Typed or Printed Name

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

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

CR25045 (03/12)

2017 OCT-23 AM 10:45