

766814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

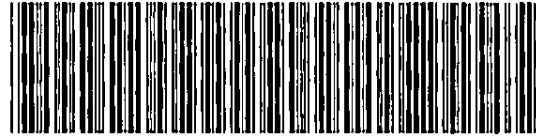
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

RIA-44

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: North Pointe of Fernandina Beach Homeowners Association Inc
Name of Corporation

DOCUMENT NUMBER: 766814

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:

Vicki L Lind

Name of Contact Person

Lind Realty & Management Inc

Firm/Company

13609 N. Main Street

Address

Jacksonville, FL 32218

City/State and Zip Code

vicki.lindrealty@gmail.com ✓

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vicki L Lind

Name of Contact Person

at (904) 485-2091

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

**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: North Pointe of Fernandian Beach Homeowners Association, Inc.

2. The principal office address: 13609 N. Main Street Jacksonville FL 32218

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/02/1983 Document number: 766814

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)

Property Management Systems Inc

463499 State Road 200

Yulee, FL 32041 Resigned

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

Lind Realty & Management Inc ✓

13609 N. Main Street

P.O. Box NOT acceptable

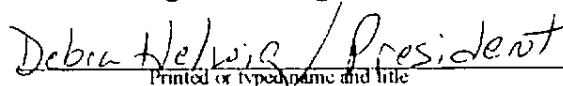
Jacksonville, FL 32218

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



Printed or typographic 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.



Signature of Registered Agent

9-19-18

Date

If signing on behalf of an entity:

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

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18 OCT -1 PM 3:31
TALLAHASSEE, FLORIDA
SECRETARY OF STATE