769109

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(Requ	uestor's Name)	
(Addı	ress)	
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	,	
(City/	/State/Zip/Phone	. #\
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PICK-UP	☐ WAIT	MAIL
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(Doce	ument Number)	12 77
Certified Copies	Certificates	of Status
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Special Instructions to Fi	ling Officer:	
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Office Use Only



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COVER LETTER

TO:	Amendment Secti Division of Corpo					
SUBJECT: Mark III Condominium Assoc. Name of Corporation						
DOC	JMENT NUMBER	:	769109			
The er	nclosed Statement of	f Change of Registered Offic	e/Agent and fee are subm	itted for filing.		
Please	return all correspor	dence concerning this matte	r to the following:			
		Susan Name of Co	M. Kase Intact Person	···· ····		
American Condominium Management Firm/Company						
		Timbe	ompany			
		615 Cape Cora	I Pkwy. W. #103			
		Ado	iress			
	Cape Coral, FL 33914 City/State and Zip Code					
		City/State a	nd Zip Code			
	-	smkmgmt@err	barqmail.com			
	E-mai	l address: (to be used for	future annual report noti	fication)		
For fu	rther information co	ncerning this matter, please	call:			
	Susai	n M. Kase	at (239)	542-4404 ime Telephone Number		
	Name of C	ontact Person	Area Code & Day	ime Telephone Number		
Enclos	sed is a \$35.00 chec	k made payable to the Depar	tment of State.			
	D P	Mailing Address: mendment Section division of Corporations O. Box 6327 allahassee, FL 32314	Street Address Amendment S Division of C Clifton Build 2661 Executiv Tallahassee, I	ection orporations ing ve Center Circle		

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

statement of cha	provisions of sections 607.0502, 617.05 unge is submitted for a corporation orga	nized under the laws of the State of $_$	Florida
	er to change its registered office or regis the corporation: Mark III Condon	ســَــا	rioriaa. - PNC ·
	office address: c/o Rossman Prope	•	
	6th Lane #2, Cape Coral, FL 33		
	address (if different): (same)	1277	
4. Date of incorp	poration/qualification: $\frac{\omega/27/10}{2}$	183 Document number:	769109
	d street address of the current registered rtment of State: (If resigned, enter resign		ith the
	Michelle Rossman		_
	c/o Rossman Property Manage	ement	-
	1104 SE 46th Lane #2, Cape 0	Ooral, FL 33904	2009 17AF
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or registered of	TAPLARAS
	Susan M. Kase		1 R 1 P
	c/o American Condominium M		FEOSTA -
		OT acceptable	86 B
	615 Cape Coral Pkwy. W. #10	3, Cape Coral, FL 33914	
The street address changed will	ess of its registered office and the stree be identical.	et address of the business office of i	ts registered agent,
Such change wa authorized by the	as authorized by resolution duly adopt he board, or the corporation has been r	ed by its board of directors or by arnotified in writing of the change.	officer so
Mich Bignatu	elle Rosman re of an officer or director	Michelle Rossmar Printed or typed name and t	
I further agree of my duties, an document is bei	the appointment as registered agent a to comply with the provisions of all sta ad I am familiar with and accept the ol ing filed merely to reflect a change in t s been notified in writing of this chang	atutes relative to the proper and con bligation of my position as registere the registered office address, I here	mplete performance ed agent. Or, if this by confirm that the
Que	ian the tax	10/1/2009	
Sig	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
**	Susan M. Kase Typed or Printed Name		
1	Jones or a common common		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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