## F00048

(Requestor's Name)
(Address)
(Address)
10th 10th to 10th to 10th
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE JUL 25 2024
JUL 25 2029

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## COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Change of Registered Agent Name of Corporation	
DOCUMENT NUMBER: F00048	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Sean Balliet	
Name of Contact Person	
San Carlos Golf Inc.	
Firm/Company	
7420 Constitution Circle	
Address	<u></u>
Fort Myers, FL 33967	
City/State and Zip Code	
gmpro@sancarlosgolfclub.co	nn
E-mail address: (to be used for future annua	I report notification)
For further information concerning this matter, [	please call:
Sean Balliet	at (239 ) 267-3131 x6 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Florida
	the corporation:  San Carlos Golf Inc.
<ol> <li>The name of</li> <li>The principal</li> </ol>	office address: 7420 Constitution Circle
	address (if different):
4. Date of incor	poration/qualification: 1980 Document number: F00048
	I street address of the current registered agent and registered office on file with the truent of State: (If resigned, enter resigned)
	deceased
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Scan Balliet
	7420 Constitution Circle
	P.O. Box NOT acceptable
	Fort Myers, FL 33967
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Stthust-	Later Secretary Arthur L. Sater Secretary Printed or typed name and title
I hereby accept I further agree of of my duties, an document is bei corporation has	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 complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this neglical merely to reflect a change in the registered office address, I hereby confirm that the page in the change.
A si	Salute of Registered Agent Oate
If signing on be	half of an entity:
San Carlos Golf	Inc.
T	oped or Printed Name

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