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SECRETARY OF STATE TALLAHASSEE, FLORIDA

JAN 0 9 2015 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: C OLONY AT POHTE VEORA X1 COHOOM IN IVM ASSOCIATION, Name of Corporation
DOCUMENT NUMBER: NOODDDDD 7087
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:
Name of Contact Person
HEGIS NAGT 3/14C. Firm/Company
130 CORRIDOR RO, # 2055 Address
POHTE VEORA, FL 32004 City/State and Zip Code
AEGIS - 1 @ CO MCAST, NET E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (909) 280-766 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 FLORIOA To in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: COLONY AT POHTE VERRA XI CONDOMINIUM ASSOCIATION
1. The name of the corporation: COLONY AT POHTE VERRA XI CONDOMINIUM ASSOCIATION 2. The principal office address: 130 CV RRIDOR RD. #12055 POHTE VERRA, FL 32004
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/24/2000 Document number: N000000 > 0 &>
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)
MARPAMINC
2201 SAWGRASS VILLAGE ORIVE
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JOHN EWING
130 CORRIDOR RO. # 2055 P.O. Box NOT acceptable 2055
PONTE VEORA, FL 32004
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 Signature of an officer or director 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.
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *