

N0000000007341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

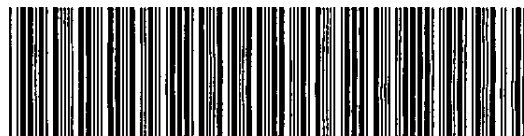
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ASHFORD VILLAGE HOMEOWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N00000007341

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:

DALE MASON

Name of Contact Person

TALLFIELD ASSOCIATES, LLC

Firm/Company

P.O. BOX 212995

Address

ROYAL PALM BEACH, FL 33421

City/State and Zip Code

DALE@TALLFIELD.COM

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

For further information concerning this matter, please call:

DALE MASON

Name of Contact Person

at (**561**) **983-6000**

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: ASHFORD VILLAGE HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 12765 WEST FOREST HILL BLVD., SUITE 1320
WELLINGTON, FL 33414
3. The mailing address (if different): P.O. BOX 212995
ROYAL PALM BEACH, FL 33421
4. Date of incorporation/qualification: 11/03/2000 Document number: N00000007341
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)

BAKALAR & ASSOCIATES, PA
150 S. PINE ISLAND ROAD, #540
PLANTATION, FL 33324

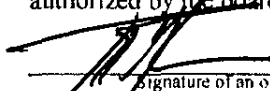
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ROSENBAUM MOLLENGARDEN PLLC
250 AUSTRALIAN AVENUE SOUTH, 5TH FLOOR
P.O. Box NOT acceptable
WEST PALM BEACH, FL 33401

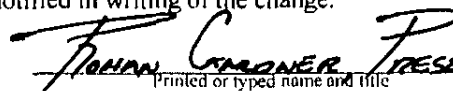
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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

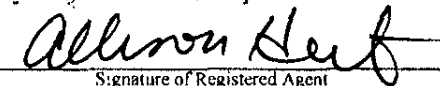


Signature of an officer or director



Printed or 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

8/11/15

Date

If signing on behalf of an entity:

Allison Hertz

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
CR2E045 (03/12)