Address 700007981687--City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Walk in Pick up time Certified Cop® ☐ Mail out ☐ Will wait ☐ Photocopy Certificate of Status NEW FILINGS **AMENDMENTS** Amendment ☐ Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal U Other Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark **OTHER FILINGS** Annual Report ☐ Fictitious Name Trademark Other

CR2E031(7/97)

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Jim Smith Secretary of State

September 4, 2002

BRAD BLACK 8946 MUSTANG ISLAND CIRCLE NAPLES, FL 34113

SUBJECT: MUSTANG ISLAND HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N0100000673

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

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Letter Number: 602A00051091

02 SEP 23 AH 10: 16 DIVISION OF CORPORATIONS

EMENT 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, the |
|--|
| undersigned corporation organized under the laws of the State of Hondle |
| submits the following statement in order to change its registered office or registered agent, or both, in the |
| State of Florida. |
| 1. The name of the corporation: Mustang Island Homeowners Associated |
| INC |
| 2. The mailing address of the corporation: 8805 Tomiami Trail East |
| Naples, R. 33962 |
| 3. Date of incorporation/qualification: <u>June 13, 2002</u> Document number: <u>NO1000000</u> 673 |
| 4. The name and address of the current registered agent and registered office: |
| Jeff M Novatt Esq 2640 Golden Gak Drwy Ste 115 23 7 |
| 2640 Golden Gat Druy Ste 115 3 = |
| Naples PC 34105 = 3 7 11 |
| 5. The name and address of the new registered agent (if changed) and /or registered office (if changed): |
| Brad Black |
| 8946 Mustang Island Circle |
| Marks, Ce. 34113 |
| 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. |
| Short of the state |
| (Signature of an officer, chairman or vice chairman of the board) (Date) |
| Riad Block To |
| Brad Black Trasers (Printed or typed name and title) |
| Having been named as registered agent and to accept service of process for the above stated corporation, 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. |
| 8/19/02 |
| (Signature of Registered Agent) (Date) |
| If signing on behalf of an entity: |
| Brad Black |
| (Typed or Printed Name) (Capacity) |

CR2E045(8/99)

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