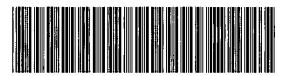
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(Red	questor's Name)					
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PICK-UP	☐ WAIT	MAIL				
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

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	mendment Section ivision of Corporations							
SUBJEC	r: Lakeview Reserve Home							
DOCUM	ENT NUMBER: NO1	000001845						
The enclo	The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.							
Please reti	urn all correspondence concerning this matter	to the following:						
		J						
	Spencer Name of Co	Solomon						
	Name of Co.	nact i cison						
	Southwest Prope							
	Firm/Co	ompany						
	P.O. Box	c 783367						
	Add							
	Winter Garde	en, FL 34778						
	City/State ar	nd Zip Code						
	spencerswpm(E-mail address: (to be used for f	@yahoo.com						
	E-mail address: (to be used for f	uture annual report notifica	tion)					
For furthe	er information concerning this matter, please of	call:						
	Spencer Solomon	at (407)	656-1081					
	Name of Contact Person	at () Area Code & Daytime	Telephone Number					
Enclosed i	is a \$35.00 check made payable to the Depart	tment of State.						
	Mailing Address: Amendment Section	Street Address: Amendment Section	on					
	Division of Corporations	Division of Corpo	orations					
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive C	enter Circle					
	1 ananassee, 1 L 32314	Tallahassee, FL 3						

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

statement of cha	provisions of sections 607. unge is submitted for a corp	oration organiz	ed under the laws of the Sta	ate of Flo	orida	is ———	
in orde	r to change its registered o	ffice or registere	ed agent, or both, in the Sta	ite of Flor	ida.		
	the corporation: <u>Lakevie</u>			<u>ociatio</u>	n		
• -	office address: 13350 W	Colonial Driv	ve, Suite 330				
Winter Ga	rden, FL 34787) (2 (4	, 7000, 7				
3. The mailing a	ddress (if different):+	Garder	<u>(183361</u> 1,FL 34778				
4. Date of incorp	poration/qualification:	3/15/2001	Document number:	NO ²	100000	1845	
	d street address of the curre runent of State: (If resigned			file with t	the		
	Spencer Solomon						
	14443 Prunning Woo	od Place					
	Winter Garden, FL 3	4787					
6. The name and (if changed):	l street address of the new i	registered agent	(if changed) and /or registe	ered office	SECRE	2009 AUG 27	- par
	Spencer Solomon				TAR	₃ 27	1
	13350 W. Colonial D				E OF	긒	
	W	P.O. Box NOT a	acceptable		FLOG	AH 10:	U
	Winter Garden, FL 3	4/8/			REFE	48	
The street address changed will	ess of its registered office be identical.	and the street ac	ddress of the business offi	ce of its r	egistere	d agent,	,
Such change was authorized by the	as authorized by resolution he board, or the corporation	n duly adopted lon has been noti	by its board of directors of fied in writing of the chan	r by an of	ficer so		
Signatu	la Sul		Jim Cample Printed or typed na		09		
I further agree of my duties, an document is bei	the appointment as regist to comply with the provising I am familiar with and ing filed merely to reflect is been notified in writing if I I I I	ions of all statut accept the oblig a change in the	agree to act in this capac es relative to the proper a ation of my position as re registered office address,	ity. Ind compl gistered c I hereby	lete perf igent. (confirm	formanc Or, if thi that the	e s ;
	Thomas Andrews		<u>8/7/</u>	09			
	mature of Registered Agent chalf of an entity:		Date				
ir aigining on be	man or an entity.						
T	yped or Printed Name						

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