NOIOOOOOASSA

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
•	· · · · · · · · · · · · · · · · · · ·	
(0)	4. (Chaka [7]: (Dh	- 40
(Cr	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
g dat garage		į
(BL	isiness Entity Nar	me)
(33		,
(DC	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
opecial instructions to	Timing Officer.	
<u> </u>		

--- '-- Office Use Only



900266511269

11/17/14--01010--024 **35.00

THOW IT AM 0:55

Ra Change

COVER LETTER

TO: A

Amendment Section Division of Corporations

Gem Estates MHV Assoc. Inc.

Name of Corporation

DOCUMENT NUMBER:

N02459

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:

Sandy L. Mann

Name of Contact Person

Gem Estates MHV Assoc. Inc.

Firm/Company

39415 Elgin Avenue

Address

Zephyrhills, FL 33542

City/State and Zip Code

sr5.mann@gmail.com

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

For further information concerning this matter, please call:

Sandy L. Mann

207 (

751-3000

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
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

statement of change is sul	omitted for a corporation organized under the laws of the State of	
in order to chang	ge its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corpor	ation: Gem Estates M H V Assoc. Inc.	
2. The principal office address: 39415 Elgin Drive, Zephyrhills, FL 33542		
3. The mailing address (if	different):	
4. Date of incorporation/q	ualification: <u>0+\0\\300\</u> Document number: <u>N0\00000355</u> 0	
	dress of the current registered agent and registered office on file with the State: (If resigned, enter resigned)	
Thor	mas Greenwood	
3953	39 Sycamore Lane	
Zepł	nyrhills, FL 33542	
6. The name and street add (if changed):	dress of the new registered agent (if changed) and /or registered office	
Bren	t Slipp 至	
3941	5 Elgin Avenue	
	P.O. Box NOT acceptable	
Zeph	nyrhills, FL 33542	
The street address of its r as changed will be identic	egistered office and the street address of the business office of its registered agent, cal.	
Such change was authorized by the board	zed by resolution duly adopted by its board of directors or by an officer so or the corporation has been notified in writing of the change.	
Richard Signature of an office	Richard Burgess Vice President Printed or typed name and title	
	ntment as registered agent and agree to act in this capacity. with the provisions of all statutes relative to the proper and complete , and I am familiar with and accept the obligation of my position as registered nt is being filed merely to reflect a change in the registered office address, I orporation has been notified in writing of this change.	
Burs Slepy	istered Agent Date	
If signing on behalf of an		
Typed or Printe		
	* * * 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)