

NO100000 8569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

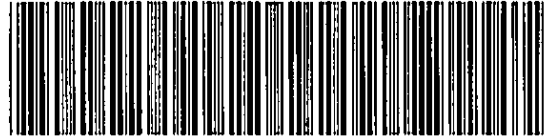
(Business Entity Name)

(Document Number)

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2019 MAY 03 PM 14:00

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Jane L. Cornett, Esq.
Office Managing Shareholder
Board Certified Specialist, Condominium and
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Becker & Poliakoff
Royal Palm Financial Center
759 SW Federal Highway, Suite 213
Stuart, Florida 34994

May 6, 2019

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Seasons at Orchid Homeowners Association, Inc.
Document Number N01000008569

Dear Sir/Madam:

Enclosed please find the Statement of Change of Registered Agent form along with Check #002350, in the amount of \$35.00 made payable to the Department of State to cover the cost of filing.

Should you have any questions, please do not hesitate to contact me. Thank you.

Sincerely,

Jane L. Cornett
JLC/mg
Enclosure

cc: Client

ACTIVE: S26795/396040.12304096_1

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: THE SEASONS AT ORCHID HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 100 VISTA ROYALE BLVD., VERO BEACH, FL 32962

3. The mailing address (if different):

4. Date of incorporation/qualification: 12/05/2001 Document number: N01000008569

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)
ROMANO, ALAN P, C/O AR CHOICE MGMT. INC
100 VISTA ROYALE BLVD
VERO BEACH, FL 32962

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Jane L. Cornett, Esq.,
Becker & Poliakoff
P.O. Box NOT acceptable
759 SW Federal Hwy., Suite 213, Stuart, FL 34994

2019 JUN 9 PM 4:00

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 officer or director: [Handwritten Signature] President

Printed or typed name and title: Michelle A. Davis, President

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: [Handwritten Signature]

Date: 5-7-19

If signing on behalf of an entity:
Typed or Printed Name

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