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THE LAW OFFICES OF LOBECK HANSON & WELLS, P.A. 2033 MAIN STREET • SUITE 403 SARASOTA, FL 34237				
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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Imperial Lakes Estates	s (Unit #1) Condominium Association, Inc. (Name of corporation)
DOCUMENT NUMBER: N0126	,
The enclosed Statement of Change	e of Registered Office/Agent and fee are submitted for filing
Please return all correspondence co	oncerning this matter to the following:
Kevin T. Wells, Esquire	
(Name of per	rson)
Lobeck Hanson & Wells, P.A.	
(Name of firm/co	empany)
2033 Main Street, Suite 403	
(Address)
Sarasota, Florida 34237	
(Čity/state and zi	p code)
For further information concerning	this matter, please call:
Kevin T. Wells, Esquire	at (941) 955-5622
(Name of person)	at (941) 955-5622 - (Area code & daytime telephone number)
Enclosed is a \$35.00 check made p	payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

	the provisions of sections 607.0502, at of change is submitted for a corporc		
Florida		stered office or registered ager	-
of Florida.			
1. The name	of the corporation: Imperial Lakes Est	tates (Unit #1) Condominium Ass	sociation, Inc.
2. The princip	pal office address: 9031 TownCenete	r Pkwy	
Bradentor	n FL 34202 US	<u>-</u>	
3. The mailin	ng address (if different): 8565 Crowns	Ct. Palmetto FL 34221 US	
	<u> </u>		
4. Date of inc	corporation/qualification: 02/07/198	34 Document numbe	r: N01264
	and street address of the current regist epartment of State: Advanced Management of SW FL	tered agent and registered offic	e on file wintthe OS HAR T
	5899 Whitfield Ave Ste 107		SE COL
	Sarasota, FL 34243		F SIA
6. The name changed):	and street address of the new regist Kevin T. Wells, Esq. c/o Lobeck Har		
	2033 Main Street, Suite 403		
	•	mailbox NOT acceptable)	
	Sarasota, Florida 34237		
The street addagent, as char	dress of its registered office and the s	street address of the business of	office of its registered
Signature of an offi	was authorized by resolution duly ac y the board, or the corporation has be licer, chairman or vice chairman of the board)	Anthony Arcole	SSE.
I hereby acce I further agre performunce registered og office addross	ept the appointment as registered age to comply with the provisions of a spinny duties) and am familiar with tent. Or if this effeument is being files, I hereby confifm that the corporate (Signifure of Registered Agent)	ent and agree to act in this cap ll statutes relative to the prope and accept the obligation of n ed merely to reflect a change t ion has been notified in writin (Date)	pacity. For and complete The position as The registered The of this change.
	chalf of an entity:		
Kevin T. Wells		Attorney	
	(Typed or Printed Name)	(Capacity)	

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