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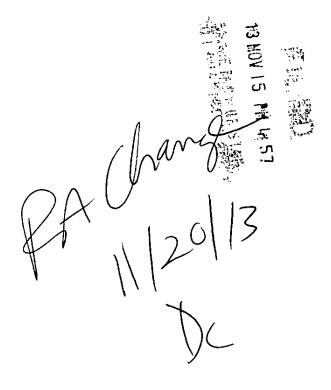
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Street Commercial Park Condominium Association, Inc.

Name of Corporation

DOCUMENT NUMBER, NO200001017

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:

Leo F. Williams

Name of Contact Person

Williams Service Group, Inc.

Firm/Company

576 96 Street

Address

Naples, FL 34108

City/State and Zip Code

Lwill56132@aol.com

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

For further information concerning this matter, please call:

Leo Williams

.,239

593-6246

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 cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ingerise submitted for a corporation organized under the laws of the State of Florida rockange its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Shirley Street Commercial Park Condominium Association, In	n (
2. The principal	office address: c/o Williams Service Group, Inc. treet, Naples, FL 34108	
	hiddress (if different): P.O. Box 770327 FL 24107-0327	
4. Date of incorp	poration/qualification: 02/11/2002 Document number: N0200001017	
5. The name and	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	Colonial Squares Realty, Inc.	
	720 Goodlette Road 5th Floor	
	Naples, FL 34102	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office.	
	Leo F. Williams, Williams Service Group, Inc.	
	576 96 Street Ave. Noeth	ļ ē
	P.O. Box NOT acceptable Naples, FL 34108	
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.	
•	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Ignatu	re of an officer or director Leo Williams CAM Printed of typed name and fille	
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete The duties, and I am familiar with and accept the obligation of my position as registered The second of the registered office address, I The the corporation has been notified in writing of this change.	
	Jefu - 11/11/13	
- (bature of Registered Agent half of an entity:	
Leo F. Willi	•	
	yped or Printed Name	

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