

Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6380

From:

Account Name	:	PAVESE LAW FIRM
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Phone	:	(239)334-2195
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Corporate Filing Menu

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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.

Casa Playa Resort Condominium Association, Inc. 1. The name of the corporation:

510 Estero Blvd., Fort Myers Beach, FL 33931 2. The principal office address:

c/o Florida Coastal Association Management. 3. The mailing address (if different): 3806 Exchange Avenue, Naples, FL 34104

4. Date of incorporation/qualification: 3/7/2002 N02000001668 Document number:

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)

Steven Mackesy, c/o Florida Coastal Association Management

380	6 Exchange Avenue	

Naples, FL 34104

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

PLF Registered Agent, L.L.C.

1833 Hendry Street

P.O. Box NOT acceptable

Fort Myers, FL 33901

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.

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Signature of an officer or director

Dana Lewis, President Printed or ryped name and little

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

If signing on behalf of an entity:

Christina Harris Schwinn

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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