

NO20000001798

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

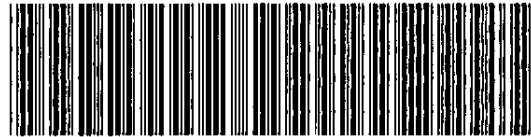
(Document Number)

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TR 2-2-11

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FILED
11 FEB -2 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TR 2-2-11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 19, 2011

BRUCE KING
KINGS MANAGEMENT SERVICES, INC.
P O BOX 32248
PALM BEACH GARDENS, FL 33420

SUBJECT: LIBERTY ISLES HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N02000001798

We have received your document for LIBERTY ISLES HOMEOWNERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 811A00001580

RECEIVED
11 FEB -2 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Liberty Isles Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N02000001798

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:

Bruce King
Name of Contact Person

Kings Management Services, Inc.
Firm/Company

P.O. Box 32248
Address

Palm Beach Gardens, FL 33420
City/State and Zip Code

mail@kingsmanagement.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruce King at (561) 627-0480
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**

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: Liberty Isles Homeowners Association, Inc.
2. The principal office address: 3400 Celebration Boulevard, West Palm Beach, FL 33411

3. The mailing address (if different): c/o Kings Management Services, Inc.
P.O. Box 32248 Palm Beach Gardens, FL 33420

4. Date of incorporation/qualification: 03/13/2002 Document number: N02000001798

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)

HILLEY + WYANT-CORTZ, P.A.

860 US HIGHWAY ONE, Suite 108

NORTH PALM BEACH FL 33408

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

ALLIANCE CAS, LLC

1000 E. HALLANDALE BEACH BLVD. SUITE B-20

P.O. Box NOT acceptable

HALLANDALE BEACH FL 33009

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]
Signature of an officer or director

Bobby Simeone, President
Printed or typed name and title

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]
Signature of Registered Agent

1-26-11
Date

If signing on behalf of an entity:

Evan B. Phillips
Typed or Printed Name

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