ND20000000953

(Requestor's Name)					
(Address)					
_					
(Business Entity Name)					
(Document Number)					
Special Instructions to Filing Officer:					

Office Use Only



500291082275

10/11/16--01008--017 **35.00

2016 OCT 11 AM 10: 28

RARO Ch8

OCT 12 2016 I ALBRITTON

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Dolphin Pointe at Waterside Condominium Association, Inc.

Name of Corporation

N0200002953

DOCUMENT NUMBER:

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:

James O'Donnell

Name of Contact Person

Sterling Property Services LLC

Firm/Company

27180 Bay Landing Drive, Suite 4

Address

Bonita Springs, FL 34135

City/State and Zip Code

info@sterlingpropertyfl.com

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

For further information concerning this matter, please call:

James O'Donnell

239 947-4552

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 chan	rovisions of sections 607.0502, 6 ge is submitted for a corporation to change its registered office or	ı organized unde	r the laws of the S	State of FLORIDA
1. The name of th	e corporation		_ _	ninium Association, Inc.
2. The principal o	Thee address.	<u> </u>	Drive, Suit	<u>e 4</u>
	Bonita Spr	ings, FL 34	4135	
3. The mailing ad	dress (if different):	-		
4. Date of incorpo	oration/qualification: 04/15	5/2002 _{Doc}	ument number: _	N02000002953
5. The name and	street address of the current regisment of State: (If resigned, enter	stered agent and r	egistered office o	n file with the
_	SAK & Associates	Mgmt, Inc	•	
_	8695 College Pkwy	y, 2031		5:0 B
_	Fort Myers, FL 339	19		2016 00 T
6. The name and s (if changed):	street address of the new register	ed agent (if chan	ged) and /or regis	tered office
_	Sterling Property S	Services LL	<u>.C</u>	A 10 20
_	27180 Bay Landing	<u> </u>	uite 4	
-	Bonita Springs, FL	34135		
The street addres as changed will b	s of its registered office and the e identical.	street address o	f the business off	ice of its registered agent,
	authorized by resolution duly a board or the corporation has b	een notified in w	riting of the char	nge.
Jerry	of an officer or director	TE	RRY A. Woo	od, President
I hereby accept to I further agree to performance of n agent. Or, if this hereby confirm to	he appointment as registered as comply with the provisions of a ny duties, and I am familiar with document is being filed merely that the corporation has been no	ent and agree to all statutes relati and accept the to reflect a char tified in writing	act in this capac ve to the proper of obligation of my ge in the register of this change.	city. and complete position as registered red office address, l
Signa	tture of Registered Agent	· ———	10-6 Date	-16
If signing on beh	alf of an entity:			
James O	<u> </u>			
	oed or Printed Name	-		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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