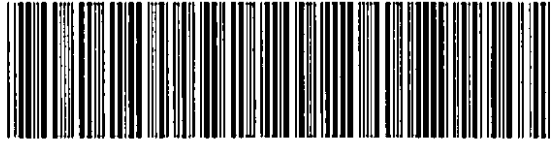


NO2000003034



600317079736

09/21/18--0000--000 \$455.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

FILED

18 AUG 21 AM 9:33

TALLAHASSEE, FLORIDA

AUG 22 2018

S. YOUNG

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Seminole Lake Townhouse Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N02000003034

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:

**Thomas Paddrik**  
Name of Contact Person

**Seminole Lake Townhouse Association, Inc.**  
Firm/Company

**PO Box 4245**  
Address

**Fort Lauderdale, FL 33338**  
City/State and Zip Code

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

For further information concerning this matter, please call:

**Thomas Paddrik** at ( **540** ) **270-8673**  
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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Semnole Lake Townhouse Association, Inc.  
2. The principal office address: 2752 NE 14th Street, Fort Lauderdale, FL 33304

3. The mailing address (if different): PO Box 4245, Fort Lauderdale, FL 33338

4. Date of incorporation/qualification: 04/19/2002 Document number: N02000003034

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)

Total Management Solutions (terminated by corp board)

1975 E. Sunrise Blvd.

Fort Lauderdale, FL 33304

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

Thomas Paddrik

2752 NE 14th Street

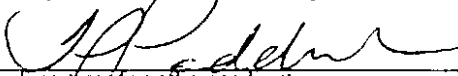
P.O. Box NOT acceptable

Fort Lauderdale, FL 33304

FILED  
18 AUG 21 AM 9:34  
TALLAHASSEE, FLORIDA

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 of an officer or director

Thomas Paddrik Director/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 of Registered Agent

Aug 16, 2018  
Date

If signing on behalf of an entity:

THOMAS J. PADDRIK  
Typed or Printed Name

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