NOZ 00000 3333

(Requestor's N	ame)
(Address)	
(Address)	
(City/State/Zip/	Phone #)
PICK-UP WA	IT MAIL
(Business Entit	ty Name)
(Document Nu	mber)
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Baytowne Wharf Neighborhood Association, INC. Name of Corporation		
DOCUMENT NUMBER: <u>NO200003333</u>		
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:		
ALAN MEYERS Name of Contact Person BAYTOWNE WHARF NEIGHBORHOOD ASS'W. INC Firm/Company		
147 Tupe lo Courtyard		
Miramar Beach, FL 32550 City/State and Zip Code	19 AUG	ANOTAL DESCRIPTION OF
E-mail address: (to be used for future annual report notification)	19 PM	ARY OF S
	2: 30	RAI
For further information concerning this matter, please call:	Š	10. F
Alan Meyers at (850) 267-8118 Name of Contact Person Area Code & Daytime Telephone Nu		ι <i>ι</i> .
Area Code & Daytine Telephone Nu	moer	

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

Passuant 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.	
1. The name of the corporation: Baytowne Whart Neighbortood Association, 2. The principal office address: 147 Tupe lo Courtyard	Inc
3. The mailing address (if different):	
4. Date of incorporation/qualification: 5/3/02 Document number: NO200000333	<u> </u>
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)	ــــــــــــــــــــــــــــــــــــــ
Hand Arendall Harrison Sale LLC	
600 Grand Panama Blud. 4th Floor	
6. The name and street address of the new registered agent (if changed) and for registered office	:- <u> </u>
(if changed): Hand Arendall Harrison Sale LLC	SION OF
35008 Emerald Coast Pkwy, Fifth Floor	RY OF
Destin, FL. 32541	STATE DRATIO
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 discovery as large.	7 7
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. Suggestive of a officer or director. Suggestive of a officer or director.	
I hereby accept the hypointment as registered agent and agree to act in this capacity. I further agree to pomply with the provisions of all statutes relative to the proper and complete.	
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 performence of my divies, 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 affice address. I hereby confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agedic B-8-2019 Date	
If signing on behalf of an entity:	
Typed or Printed Name	

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