

NO 20000007499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

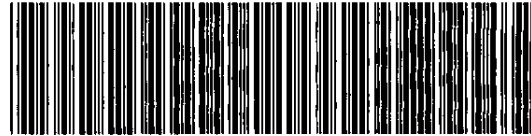
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts OCT 08 2010



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2010

SHERRILL SCHAFER
COMMUNITY MANAGEMENT CONCEPTS, INC.
7400 BAYMEADOWS WAY, STE 317
JACKSONVILLE, FL 32256

SUBJECT: LA COCINA CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N02000007499

We have received your document for LA COCINA CONDOMINIUM 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):

An officer or director must sign and print name and title in the space provided on the form.

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: 310A00022984

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: La Cocina Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N02000007499

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:

Sherrill Schafer
Name of Contact Person

Community Management Concepts, Inc.
Firm/Company

7400 Baymeadows Way, Suite 317
Address

Jacksonville, FL 32256
City/State and Zip Code

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

For further information concerning this matter, please call:

Sherrill Schafer at (904) 367-8532
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: La Cocina Condominium Association, Inc.
2. The principal office address: 7400 Baymeadows Way Suite 317, Jacksonville FL 32256
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10-1-02 Document number: N02000007499
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)

Sharon Fisher

1008 Oceanwood Drive North

Neptune Beach, FL 32266

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

Community Management Concepts, Inc.

7400 Baymeadows Way, Suite 317

P.O. Box NOT acceptable

Jacksonville, FL 32256

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10 OCT -8 PM 2:05
SECRETARY OF STATE
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.

see attached

Signature of an officer or director

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.

Sherrill Schafer
Signature of Registered Agent

August 31, 2010
Date

If signing on behalf of an entity:

Sherrill Schafer

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
CR2E045 (8/05)

for Signature Purposes Only

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
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3. The mailing address (if different):

4. Date of incorporation/qualification: 12-1-02 Document number: N02000007499

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Sharon Fisher

1008 Oceanwood Drive North

Neptune Beach, FL 32266

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

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7400 Baymeadows Way, Suite 317

P.O. Box NOT acceptable

Jacksonville, FL 32256

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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

TON MCNETT PRESIDENT La Cocina
Printed or typed name and title

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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

August 31, 2010
Date

If signing on behalf of an entity:

Sherill Schafer

Typed or Printed Name

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

5180
5630

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

CR2E04S (8/05)