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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2014

CYPRESS KNOLL PROPERTY OWNERS ASSOCIATION, INC. 2180 WEST SR 434, STE 5000 LONGWOOD, FL 32779-5044

SUBJECT: CYPRESS KNOLL PROPERTY OWNERS ASSOCIATION, INC.

Ref. Number: N02000008686

Our records indicate the registered agent for the above named corporation resigned on December 6, 2013 and that the corporation currently does not have a registered agent designated.

Chapter 607/617, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a corporation for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named corporation 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-6050.

Gary Blankenbaker Document Specialist Division of Corporations

Letter number: 914A00002796

*STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the pr statement of chang in order t	ze is submitted fo	r a corporat	ion organiz	zed under	the laws	of the Sta	ate of		_
									Inc
The name of the The principal of	fice address:	9887 Saint	Petersh	Street	Nort	3370	Suite 12	301	
3. The mailing add									
4. Date of incorpor	ration/qualificati	on:	soosle	Doci	ıment nı	ımber:	N 0200	000 86	86
5. The name and st Florida Departm					gistered	office on	file with th	e `	
		Resign	ie d						
· 							·		
									
6. The name and st (if changed):	Associa	a Gulf C	onst, I Street	nc. North			so l	14 APR	· · · · · · · · · · · · · · · · · · ·
	Saint	Peters!	O. Box NOT a	-		2	· · · · · · · · · · · · · · · · · · ·		71 D
The street address as changed will be	of its registered	office and t	he street a	ddress of	the bus	iness offi	ce of its reg	ristered ag	ent,
Such change was a authorized by the l	authorized by reboard, or the con	solution dul poration ha	y adopted l s been noti	by its boa fied in w	ord of diriting of	the chan	Fix	er so	
I hereby accept the I further agree to a performance of my agent. Or, if this a hereby confirm the	e appointment a comply with the duties, and I a locument is beir at the corporation	s registered provisions o in familiar w ng filed mero puyhas been	agent and of all status with and ac oly to reflec notified in	agree to tes relative cept the c ct a chang writing o	act in the pe to the obligation of this characteristics of this characteristics are the characteristics of this characteristics.	his capaci proper a on of my p register hange.	ity. nd complet position as ed office ad	e registered Idress, I	
	/L//	-			3/15	2014			
Signatu	ure of Registered Ager	11				Date			
lf signing on behal	if of an entity:								
k	eith Heath	1							
Турес	or Printed Name								

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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