## N03000002513

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## **COVER LETTER**

Division of Corporations	
SUBJECT: Whispering Creek Hurrecomer Name of Corpor	es Association Ha III, Inc
DOCUMENT NUMBER: N 0300000	2513
The enclosed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
Robert Del	Rue
Sufficest Rea	lty, Inc.
366 Flaster Address	Arenne
New Smylna City/State and Zi	Brych FL 32169
E-mail alldress: (to be used for future	annual report notification)
For further information concerning this matter, please call:	
Name of Contact Person at	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departmen	t 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

TO: Amendment Section

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

rursuant 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 \[ \frac{\frac{101.44}{100.0000000000000000000000000000000000
1. The name of the corporation: Whispering Creek Homevuhers Association II a III, Inc
2. The principal office address: 1190 Velican By Dive
- Vayton Bach TL 32119
3. The mailing address (if different):
4. Date of incorporation/qualification: 63/21/2003 Document number: N 030000 2513
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)
Southern States Management angle to =
WAD OF OUR DESTRUCTION
- 1170 Pallan Bry Mine 3 =
- Vaybons Brach fl 32119 32 0 m
6. The name and street address of the new registered agent (if changed) and /or registered office $\mathcal{L}_{\mathcal{O}}$
(" changed).
Sulf loast healty Inc.
366 Plagle: Avenue
P.O. Bios NOT acceptable
New Somman Beach, Floride 32169
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.
Joseph S. Aleman Karen S. Rieman
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.
The state of the s
Signature of Registers (Agen)
If signing on behalf of an entity:
Robert Del Rose
Typed or Printed Name

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