## N0300006294

(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



400261030994

06/16/14--01025--020 \*\*35.00

SECRETARY OF STATE
ONVISION OF CORPORATIONS
ON OF CORPORATIONS

C. LEVOIS JUN 30 2014 EXPORTABLE R



Andrew S. Provost, Eşq.
Attorney at Law
Phone: (239) 552-3200 Fax: (239) 263-1633
aprovost@bplegal.com

4001 Tamiami Trail North Suite 410 Naples, Florida 34103

June 12, 2014

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Villages at Stella Maris Condominium Assoc 2300, Inc.; Document No.:

N03000006294

To Whom It May Concern:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above-referenced Association. Also enclosed please find check number 000504 in the amount of \$35.00 to cover the cost of filing.

Thank you for your attention to this matter.

Very truly/qurs,

Andrews. Provost

For the Firm

ASP/jcm

Enclosure (as stated)

ACTIVE: 5853663\_1

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

	provisions of sections 607.0502, 617.0502, 607-1508, or 617.1508. Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida	<del></del>	
	er to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of	the corporation: Villages at Stella Maris Condominium Assoc 2300.	Inc.	
2. The principal	office address: CHANGE TO: c/o Resort Management, 815 Bald Eagle Dri	ve,	,
	Marco Island, Florida 34145		
3. The mailing a	address (if different): CHANGE TO: c/o Resort Management, 815 Bald Eagle	<u> Driv</u>	e,
<del></del>	Marco Island, Florida 34145		
<ol><li>Date of incorp</li></ol>	poration/qualification: 09/23/2002 Document number: N03000006	294	
	d street address of the current registered agent and registered office on file with the ettment of State: (If resigned, enter resigned)		
	HART, JAMES W JR		
	2180 W. STATE ROAD 434, SUTIE 5000		
	LONGWOOD, FL 32779	14 J	JSHVIG Das
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		91 NUL 4	ON OF CO
	Becker & Poliakoff, P.A.	呈	OF OF
	4001 Tamiami Trail North, Suite 410	9: 2	ORPORATIONS
	P.O. Box NOT acceptable	Ċ,	OX.
	Naples, FL 34103		
The street addre as changed will	ess of its registered office and the street address of the business office of its registered be identical.	agent,	
Such change we	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.		
Kelyh	Te of an officer of director Rendered By and title		
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete perfor  I am familiar with and accept the obligation of my position as registered agent. Or,  ing filed merely to reflect a change in the registered office address. I hereby confirm the  confirmation notified in writing of this change.	mance if this at the	
<u> </u>	Listure of Registered Agent Date		
If signing on be	half of an entity:		
	ndrew S. Provost		

\* \* \* 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)