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(Re	questor's Name)	
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(Do	cument Number)	
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COVER LETTER

TO:	Amendme Division of	nt Section of Corporations			
SUBJ	ECT: D	ELASOL HOM	IEOWNERS A	ASSOCIATION,	INC.
DOC.	UMENT NU	JMBER:	N0300	0006439	
The e	nclosed State	ement of Change of I	Registered Office/A	agent and fee are subr	nitted for filing.
Please	e return all co	orrespondence conce	erning this matter to	the following:	
			MARK E. ADAM		
			Name of Conta	ct Person	
		G	OEDE & ADAM	CZYK PLLC	
			Firm/Com	pany	
		8950 FC		OL WAY, STE. 10	00
			Addres	S	
			NAPLES, FL City/State and		
			City/Blate and	Dip Code	
	_		nark@flcommun		
		E-mail address: (1	to be used for futt	ire annual report no	tification)
For fu	rther informa	ation concerning this	s matter, please call	:	
		lark E. Adamczy	k	at (239)	331-5100
	Na	me of Contact Perso	n	Area Code & Day	rtime Telephone Number
Enclo	sed is a \$35.0	00 check made paya	ble to the Departme	ent of State.	
		Mailing Addr Amendment S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address Amendment Division of Clifton Build 2661 Execut Tallahassee,	Section Corporations ling ive Center Circle

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: Delasol Homeowners Association, Inc.
2. The principal office address: <u>Clo Integrated Property Management</u> 5020 Tamiami Trail N., Ste 206, Naples FL 34103
5020 Tamiami Trail N., Ste 206, Naples FL 34103
3. The mailing address (if different):
4. Date of incorporation/qualification: 7 28 2003 Document number: N0300006439
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)
Integrated Property Management. 5020 Tamiami Trail N. Ste. 2055 - 100 Naples, FL 34103.
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Mark E. Adamczyk ES9., Loede & Adam Ezyk
8950 Fontana Del Solway, Ste. 100 P.O. Box NOT acceptable Naples, FL 34109
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.
James P. Culkar President. Signature of an officer or director James P. Culkar President.
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.
6 30 2011
Signature of Registered Agent Date If signing on behalf of an entity:
MARK ADAMCZYK, Em. Typed or Printed Name

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