Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6380

Prom:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone : (561)694-8107 Fax Number : (561)694-1639 : (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Bmail Address:

REGISTERED AGENT CHANGE

GRANDE VILLAS AT WORLD GOLF VILLAGE CONDOMINIUM **ASSO**

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTE FOR CORPORATIONS

1. The name of the corporation is: Grande	Villas At Worl	d Golf Village Condomin	ium Association, Inc.
2. The principal office address: 100 FRON	T NINE DRIV	<u>E</u>	
ST. AUGUSTINE FL 32092	CONTERDENT	YO MAA W NICHTEE STIFFE	100
3. The mailing address (if different): 4960 BOCA RATON FL 33431	CONFERENC	E WAY NORTH SUITE	
	0/0/0003		N03000007869
4. Date of incorporation/qualification:	9/8/2003	Document Number:	
5. The name and street address of the curre Florida Department of State:	int tegistered a	Relit and registered office.	on the wish the
CORPORATION SERVICE OF 1201 HAYS STREET	OMPANY		
6. The name and street address of the new (if changed):	registered ager	it (if changed) and for reg	istered office
Corporate Creations Net	work Inc.		
11380 Prosperity Farms	Road #221E		
Palm Beach Gardens FL	Box Not acceptable) . 33410		
The street address of its registered office agent, as changed will be identical.	and the street	address of the business	office of its registered
Such change was authorized by resolution authorized by the board, or the corporation	on duly adopte a has been notif	fied in writing of the chang Alciandra Villegas, Attorney	ge. in-Fact
(Signature of an officer or director)		(Printed of Typed n	ame and title)
I hereby accept the appointment as registe I further agree to comply with the properformance of my duties, and I am familiagent. Or, if this document is being filed hereby confirm that the corporation has b	visions of all iar with and ac l merely to refl	statutes relative to the p cept the obligation of my p ect a change in the regist	proper and complete position as registered
(Signature of Registered Agent)		7/25/	19
If signing on behalf of an entity:			
Alejandra Villegas, Special Secretary (Typed or Printed Name)			
Make checks i Mail to: Division of Co	PAYABLE TO FI PRPORATIONS,	LORIDA DEPARTMENT OF P.O. BOX 6327, TALLAHA	State Assee, FL 32314
Corporate Creations International Inc. 11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107		TÄLLÄHÄSSI	FIL SECRETARY
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