(Re	equestor's Name)	·
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
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COVER LETTER

Amendment Section

TO:

Division of Corporations
SUBJECT: THE HAMLET HOMEOWNERS ASSOCIATION OF (Name of Corporation) HILLS BOROUGH COUNTY, INC.
DOCUMENT NUMBER: 36 - 3245653
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DOROTHY DIFLORI PRES. (Name of Contact Person)
The Hamlet Homeowners Association of Hillsborough County, (Firm/Company)
3315 CHEVIOT DR. (Address)
TAMPA, FL 33618 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (
Final area of 5.25.00 aheals made noughly to the Donortment of State

Enclosed is a \$35.00 check made payable to the Department 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

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: THE HAMLET HOMEOWNERS ASSOCIATION OF
1. The name of the corporation: THE HAMLET HOMEOWNERS ASSOCIATION OF HILLS BOROUGH BOUNTY, INC. 2. The principal office address:
4131 GUND HWY, TAMPA, FL 33618
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 5/4/84 Document number: N \$503074
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
ROBERT L. TANKEL, ATTY
1022 MAIN ST., SUITE D
DUNEDIN, FL 34698
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
FRANCIS EI FRISCIA
F550 WEST EXECUTIVE DR., SUITE 250 (P.O. Box NOT acceptable)
TAMPA, FL. 33609
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.
(Signature of anyonicer or director) DOROTHY DIFIORE 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.
(Signature of Registered Agent) (Signature of Registered Agent) (Date)
(Signature of Registered Agent) If signing on behalf of an entity:
(Typed or Printed Name)

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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