ND3939

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COVER LETTER

TO: Amendment Section Division of Corporations

North Oaks Condominium Association, Inc.

Name of Corporation

DOCUMENT NUMBER: N03939

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:

Charles Evans Glausier

Name of Contact Person

Glausier Knight, PLLC

Firm/Company

400 N. Ashley Drive, Ste. 2020

Address

Tampa, FL 33602

City/State and Zip Code

cglausier@glausierknight.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Evans Glausier

Name of Contact Person

Area Code & Daytime Telephone Number

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

statement of cha	inge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of	Florida
		Condominium Association, In Hwy 41, Lutz, FL 33549	C.
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 08/30/19	Document number: N039	39
	street address of the current registement of State: (If resigned, enter i	tered agent and registered office on file vresigned)	vith the
	Charles Evans Glausier	r	
1801 N. Highland Avenue		ue	
	Tampa, FL 33602		福言工
6. The name and (if changed):	SEGNETAL OF STORIGE		
	Charles Evans Glausier	<u> </u>	
	400 N. Ashley Drive, Su		100 G
	Tampa, FL 33602	lox NOT acceptable	_
The street addreas changed will	ess of its registered office and the be identical.	street address of the business office of i	ts registered agent,
_		dopted by its board of directors or by an een notified in writing of the change.	
(S/ John	Stickles	John Stickles, Presider	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not	ent and agree to act in this capacity. Il statutes relative to the proper and con and accept the obligation of my positio to reflect a change in the registered offi ified in writing of this change.	
Chal	- AV	6 DEZ17	
_	half of an entity:	Date	
Т	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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