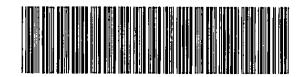
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## COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: THE OPERA CLUB of THE VILLAGES Name of Corporation
DOCUMENT NUMBER: N 0 4 0 0 0 0 0 1 1 6 6
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:
Name of Contact Person  THE OPERA CLUB of THE VILLAGES  Firm/Company  2005 MARKRIDGE LOOP  Address  THE VILLAGES, FL 32/62  City/State and Zip Code  ddharrold@gmail.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DAVIDHARROLDat (3/7)902-0422Name of Contact PersonArea 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

## $\mathbf{v}^{\prime}$ 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 OPERA CLUB OF THE VILLAGES
2. The principal office address: 2005 MARKRIDGE LOOP
THE VILLAGES FL 32/62
THE VILLAGES, FL 32/62  3. The mailing address (if different): P,O, BOX 1/28, LADY LAKE FL 32/58
4. Date of incorporation/qualification: FEB, 2, 2004 Document number: NO 4000001166
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)
HELGA SHARP
$=$ $=$ $A_{V}$
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DAVD HARROLD
DAVD HARROLD  2005 MARKRIDGE LOOP  P.O. Box NOT acceptable
THE VILLAGES, FL 32/62
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.
Versledice & Principal Geraldine Piscitelli-President Signature of an officer or director  Printed or typed name and title
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  July 16, 2021  Date  Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, F1. 32314 CR2E045 (04/13)