ND400003117

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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COVER LETTER

TO: Amendme Division o	nt Segtion f Corporations	
subject: AL		n <u>-DNDDMINIUM A</u> SSOCIATION, INC.
DOCUMENT NU	umber: <u>N0400003</u>	117
The enclosed State	ement of Change of Registered Office/Ag	gent and fee are submitted for filing.
Please return all co	orrespondence concerning this matter to	the following:
-	Dee Masterson	
	Hayden & Assoc	
	12650 Whitehall Dr	
	Ft Myers, FL 33907	
	dee@hayden-associat	es.com
-	Address	
	City/State and Z	ip Code
-	E-mail address: (to be used for futur	e annual report notification)
	2 man address (to be used for fatur	o united report notification)
For further inform	ation concerning this matter, please call:	
~		
! See Ma	Strson a	Area Code & Daytime Telephone Number
Na	me of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.	00 check made payable to the Departmer	nt of State.
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	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 FL in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ALTESSA III AT VASARI CONDOMINIUM ASSOCI
2. The principal office address: 12650 Whitehall Dr Ft Myers, FL 33907
3. The mailing address (if different):
4. Date of incorporation/qualification: 325004 Document number: NO40000311
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)
· Haydena Assac -
8359 Beacon Blvd, Suite 313 Ft Myers, FL 33907
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
12650 Whitehall Dr Ft Myers, FL 33907
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 an officer or director 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.
11-7-12-
Signature of Registered Agent Date If signing on behalf of an entity:
Dee Masterson Insular of Arrived Name

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