## ND4000003425

(Requesto	or's Name)
(Address)	
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(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Pastelle Property Owners Association, Inc.

Name of Corporation

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:

Deborah L. Ross, Esquire

Name of Contact Person

Ross Earle & Bonan, P.A.

Firm/Company

789 SW Federal Hwy, Suite 101

Address

Stuart, FL 34994

City/State and Zip Code

dlr@reblawpa.com

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

For further information concerning this matter, please call:

Deborah L. Ross, Esquire

Name of Contact Person

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
1. The name of the corporation: Pastelle Property Owners Association, Inc.  2. The principal office address: c/o Coastal Community Association Mangement,  909 SE Central Parkway, Stuart, FL 34994
3. The mailing address (if different):
4. Date of incorporation/qualification: 4/2/04 Document number: N0400003425
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)
Coastal Community Association Management
909 SE Central Parkway
Stuart, FL 34994
Stuart, FL 34994  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Deborah L. Ross, Esquire/Ross Earle & Bonan, P.A.
789 SW Federal Highway, Suite 101
P.O. Box NOT acceptable Stuart, FL 34994
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.
Separature of an other or director  You can be an other or director  Printed or typed rame 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 lam 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.
4/8/15
Signature of Registered Agent  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, FL 32314
CR2E045 (03/12)