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Tot

Division of Corporations

Fax Number : (850)617-6380

Prom:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

REGISTERED AGENT CHANGE

THE HAMMOCKS AT MARATHON CONDOMINIUM ASSOCIATION, IN

Certificate of Status	0
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HL 29 230

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 Hammocks at Marathon Condominium Association, Inc.	;.
2. The principal office address: 1688 OVERSEAS HIGHWAY, MARATHON, FL 33050	
3. The mailing address (if different):	_
4. Date of incorporation/qualification: 04/26/2004 Document number: N0400004209	
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)	
CORPORATION SERVICE COMPANY	
1201 HAYS STREET	
TALLAHASSEE, FL 32301	
TALLAHASSEE, FL 32301 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Corporate Creations Network Inc.	
11380 Prosperity Farms Road #221E	
P.O. Box NOT acceptable Pairm Roach Cardono El 22410	
Palm Beach Gardens, FL 33410	
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.	
Carlos M Alvarez, Attorney-in-Fact	
hereby accept the appointment as registered agent and agree to act in this capacity. In the provisions of all statutes relative to the proper and complete 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.	
07/26/2019	
Signature of Registered Agent Date	
f signing on behalf of an entity:	
Carlos M Alvarez, Special Secretary	
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

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