Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

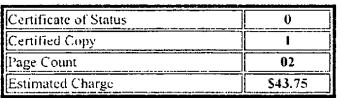
Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:_____

REGISTERED AGENT CHANGE PALERMO LAKES, INC.



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SEP 20 2018

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Electronic Filing Menu

Corporate Filing Menu

Help

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

2018-09-19 08:14:39 CST

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: PALERMO LAKES, INC.
2. The principal office address: 1580 Sawgrass Corporate Pkwy., Stc. 210 Fort Lauderdale, FL 33323
3. The mailing address (if different):
4. Date of incorporation/qualification: 05/11/2004 Document number: N04000004711
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)
PROTULIS, STEVE
1580 Sawgrass Corporate Pkwy., Stc. 210
Fort Lauderdale, FL 33323
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
C T Corporation System
c/o CT Corporation System, 1200 South Pine Island Road
P.O Box NOT acceptable
Plantation, Florida 33324
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.
April Wittenwyler, Secretary
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.
By: 09/18/2018
Signature of Registered Agent Date
If signing on behalf of an entity:
Sarah Revelle, Assistant Secretary
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)