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COVER LETTER

TO: Amendment Section **Division of Corporations**

Rapallo One Association, Inc.

Name of Corporation

N04000009117

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:

Todd B. Allen, Esq.

Name of Contact Person

Lindsay & Allen, PLLC

13180 Livingston Road, Suite 201

Naples, FL 34109

City/State and Zip Code

gm@rapallo.net

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

For further information concerning this matter, please call:

Todd Allen

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

statement of change is su	ns of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this abmitted for a corporation organized under the laws of the State of Florida age its registered office or registered agent, or both, in the State of Florida.
1. The name of the corpo	oration: Rapallo One Association, Inc.
2. The principal office ac	8551 Via Rapallo, Estero, FL 33928
3. The mailing address (i	f different): See principal address
4. Date of incorporation/	qualification: 9/23/2004 Document number: N0400009117
5. The name and street a	ddress of the current registered agent and registered office on file with the State: (If resigned, enter resigned)
Todd	B. Allen, Esq.
8950	Fontana Del Sol Way
Naple	es, FL 34109
6. The name and street a (if changed):	Fontana Del Sol Way es, FL 34109 ddress of the new registered agent (if changed) and /or registered office B. Allen, Esq.
Todd	B. Allen, Esq.
1318	0 Livingston Road, Suite 201
Naple	P.O Box NOT acceptable es, FL 34109
The street address of its as changed will be ident	registered office and the street address of the business office of its registered agent, ical.
Such change was author authorized by the board.	rized by resolution duly adopted by its board of directors or by an officer so, or the corporation has been notified in writing of the change.
Signature of an oft	icer director Printed or typed name and title
I further altree to comple performance of my duffi	of the standard of the complete to act in this capacity. If with the provisions of all statutes relative to the proper and complete Ex. and I am familiar with and accept the obligation of my position as registered Pennis being filed merely to reflect a change in the registered office address, I corporation has been notified in writing of this change.
Signature of R	egistered Agent Date
If signing on behalf of a	•
Typed or Pri	nted Name

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