

NO 5060000391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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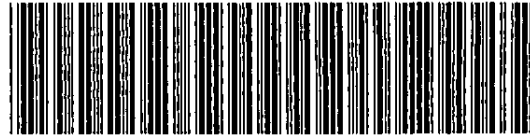
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ARISTA HOMEOWNERS ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** NO5000000391

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:

WILLIAM H. PAUL  
Name of Contact Person

—  
Firm/Company

2411 FOUNTAIN GRASS DRIVE  
Address

VALRICO, FLORIDA 33594  
City/State and Zip Code

WPau11951@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM H. PAUL at (813) 472-5651  
Name of Contact Person Area Code & Daytime Telephone Number

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 in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: ARISTA HOMEOWNERS ASSOCIATION, INC
- 2. The principal office address: 2411 FOUNTAIN GRASS DR, VALRICO, FL 33594
- 3. The mailing address (if different): P.O. BOX 2113 VALRICO, FL 33595
- 4. Date of incorporation/qualification: 1/12/2005 Document number: 1105000000391
- 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)

BUSH ROSS REGISTERED AGENT SERVICES, LLC  
1801 NORTH HIGHLAND AVE  
TAMPA, FLORIDA 33602

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

WILLIAM H. PAUL  
2411 FOUNTAIN GRASS DRIVE  
P.O. Box NOT acceptable  
VALRICO, FLORIDA 33594

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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.

Candance J Levy  
Signature of an officer or director

Candance J Levy Secretary  
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.

William H. Paul  
Signature of Registered Agent

July 30, 2012  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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