## N0500001463

(Requestor's Name)						
(Address)						
( in the state of						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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## **COVER LETTER**

TO:	Amendment S Division of Co	ection orporations						
SUBJECT: Hemingway Estates Association, Inc.  Name of Corporation								
DOC	UMENT NUME	BER:	N0500000	1463				
The er	nclosed Statemen	nt of Change of Registered	d Office/Agent	and fee are submitted for filing.				
Please	return all corres	pondence concerning this	s matter to the fo	ollowing:				
		Bra Name	ad van Rooye e of Contact Per	en son				
Home Encounter, LLC Firm/Company								
1001 E. Columbus Dr Address								
Tampa, FL. 33605 City/State and Zip Code								
	brad@homeencounter.com  E-mail address: (to be used for future annual report notification)							
For fu	rther information	n concerning this matter, p	olease call:					
		d van Rooyen	at (	813 600-5090 ext 106 rea Code & Daytime Telephone Number				
Enclos		neck made payable to the						
		Mailing Address: Amendment Section Division of Corporation 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

•	provisions of sections 607. ange is submitted for a corp							
in orde	er to change its registered o	office or registered	l agent, or both, in the Stat	e of Florida.				
1. The name of	the corporation: Heming	gway Estates	s Association, Inc.					
2. The principal office address: 1001 E. Columbus Dr., Tampa, FL. 33605								
3. The mailing a	address (if different):							
4. Date of incorporation/qualification: 02/11/2005 Document number:				N05000001463				
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)								
	Kings Realty and Property Management INC							
	504 S. Kings Ave, Suite 200							
	Brandon, FL. 33511	<u> </u>		AEC SEP				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):								
	Home Encounter LL	С		LORII :				
	1001 E. Columbus Dr.							
	P.O. Box NOT acceptable							
	Tampa, FL. 33605							
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 wa authorized by th	as authorized by resolution ne board, or the corporation	n duly adopted by on has been notifi	its board of directors or led in writing of the chang	by an officer so e.				
x Res	re of an officer or director	la s	RADIS SENC	PRESIDENT				
	the appointment as regist to comply with the provisi and I am familiar with and i ing filed merely to reflect is s been notified in writing o							
	8 gnature of Registered Agent Date							
If signing on behalf of an entity:								
Brad vo	None Roogen							

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