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SECRETARY OF STATE

AND

C. LEWIS
DEC 1 3 2013
EXAMINER

COVER LETTER

Division of Corporations Capstone Quarters Condominium Association, Inc. Name of Corporation 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: Kim Oliver Name of Contact Person Professional Homeowners Association Management, LLC Firm/Company 9331 NW 13th Place Address Gainesville, Florida 32606 City/State and Zip Code Kimolivercam1@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kim Oliver Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Amendment Section Mailing Address: Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

Amendment Section

APPROVED AND FILFO

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stat hange is submitted for a corporation organized under the laws of the State of <u>Flo</u> ler to change its registered office or registered agent, or both, in the State of Flor	rida	
1. The name of	f the corporation: Capstone Quarters Condominium Associatio	n, INC	
2. The principa	al office address: 9331 NW 13th Place	·	******
	Gainesville, Florida 32606	· · · · · · · · · · · · · · · · · · ·	-
3. The mailing	address (if different): same		
4. Date of incor	prporation/qualification: 06-16-2005 Document number: N050000	06247	
	nd street address of the current registered agent and registered office on file with t artificnt of State: (If resigned, enter resigned)	he	
	University Association Management, LLC		
•	2233 NW 41 Street, Suite 700-G	S AT	<u></u> -
	Gainesville, Florida 32606	ECRE	3 DEC
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office:	ASSET O	:-9 PH
	Professional Homeowners Association Management, LLC		
	9331 NW 13th Place	芸芸	81:1
	P.O. Box NOT acceptable	7	
	Gainesville, Florida 32606		
The street address changed will	ress of its registered office and the street address of the business office of its reg Il be identical.	pistered agent,	
	cas authorized by resolution duly adopted by its board of directors or by an official the board, or the corporation has been notified in writing of the change.		
Signatu	Ryan W. Donk Prosession Printed or typed hashe and title	iden L	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	of the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as this document is being filed merely to reflect a change in the registered office ad a that the corporation has been notified in writing of this change.	e registered dress, 1	
Dyn	Olumber of Registered Agent 12-6-13		
If signing on be	ehalf of an entity:		
KIH!	Typed or Printed Name		

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