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COVER LETTER

Division of Corporations		
Positano Place at Naples II Condominium Association, Inc.		
Name of Corporation		
DOCUMENT NUMBER: N05000008032		
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:		
Jack Hedenstrom		
Name of Contact Person		
Positano Place at Naples		
Firm/Company		
12910 Positano Cir		
Address		
Naples, FL 34105		
City/State and Zip Code		
jackh@positanoplaceatnaples.com		
E-mail address: (to be used for future annual report notification)		
,		
For further information concerning this matter, please call:		
Jack Hedenstrom at (239) 262-8382 Name of Contact Person Area Code & Daytime Telephone Number		
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 Street Address: Amendment Section		
Division of Corporations Division of Corporations		
P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301

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

Pursuart to the provisions of sections 607.0502, 617.0502, 607.1508, or 613 statement of change is submitted for a corporation organized under the law: in order to change its registered office or registered agent, or both,	s of the State of Florida
1. The name of the corporation: Positano Place at Naples II Co 2. The principal office address: 12910 Positano Cir, Naples, FL	ndominium Association, Inc. 34105
3. The mailing address (if different):	
4. Date of incorporation/qualification: August 5, 2005 Document m	umber: N05000008032
5. The name and street address of the current registered agent and registered Florida Department of State: (If resigned, enter resigned)	office on file with the
Goede & Adamczyk, PLLC	ه المنا
8950 Fontana Del Sol Way	1
Naples, FL 34109	
6. The name and street address of the new registered agent (if changed) and (if changed): Peck & Peck PA	/or registered office
5200 Tamiami Trail N. #101	
P.O. Box NOT acceptable Naples, FL 34103	
The street address of its registered office and the street address of the business changed will be identical.	iness office of its registered agent,
Such change was authorized by resolution duly adopted by its board of diauthorized by the board, or the corporation has been notified in writing of	rectors or by an officer so the change.
Brent Bailey Signature of an officer of forector Brent Bailey	or typed name and title
I hereby accept the appointment as registered agent and agree to act in the I further agree to comply with the provisions of all statutes relative to the performance of my duties, and I am familiar with and accept the obligation agent. Or, if this document is being filed merely to reflect a change in the hereby confirm that the corporation has been notified in writing of this change.	proper and complete on of my position as registered registered office address. I
Merettetelfler 7/	14/17
on behalf of Peck & Peck P.A. If signing on behalf of an entity: Merediated A. Peck	Ddie

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

CR2E045 (03/12)

Typed or Printed Name