## N0500000 3219

(Re	equestor's Name)	<del></del>
(Ad	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		į

Office Use Only



700241221067

10/29/12--01043--009 \*\*35.00

72 OCT 29 AM 9: 17

new

OCT 3 0 2012 C. MUSTAIN

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: The Wardah at Paus Community Personation
DOCUMENT NUMBER: NO50008219
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:
(Name of Contact Person)
(Firm/Conpany)
3550 Brush wood Park Dr #150 (Address)
City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (813) 384-2651 (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
1. The name of the corporation: The Unandahs at Pasts Community Association, To 2. The principal office address: 9887 4th Stoot W, #301  2. The principal office address: 9887 4th Stoot W, #301
3. The mailing address (if different):
4. Date of incorporation/qualification: 8/10/2005 Document number: 10500008219
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  Stratfield Froman Holding + Cash  Stratfield Querius N  Stratfield
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  **Part ** Address** (if changed) and /or registered office (if changed):  **Part ** Address** (if changed) and /or registered office (if changed):  **Part ** Address** (if changed) and /or registered office (if changed):  **Part ** Address** (if changed) and /or registered office (if changed):  **Part ** Address** (if changed) and /or registered office (if changed):  **Part ** Address** (if changed) and /or registered office (if changed):  **Part ** Address** (if changed):  **Part ** Address** (if changed) and /or registered office (if changed):  **Part ** Address** (if changed):  **Part ** Addre
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.  **Example 1 and 1 like or director**  **Example 1 and 1 like or director**  **Transport of the change and title or typed hame and title or typed ham to the typed hame and title or typed hame and typed
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.  (Signature of Registered Agent)  (Date)
11 1 D 1 1 D 1 1 D 1 1 D 1 1 D 1 D 1 D

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