N05000011534

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	- #)
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: BILL FRANCE BOULEVARD BUSINESS I Name of Corporation	PARK OWNERS' ASSOCIATION	
DOCUMENT NUMBER: N05000011534		
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Nicholas Nypaver		
Name of Contact Person		
LRT Assets LLC		
Firm/Company		
PO Box 55		
Address		
Valencia, PA 16059		
City/State and Zip Code		
nick@jvfisherllc.com		
E-mail address: (to be used for future annual repo	rt notification)	
For further information concerning this matter, please	call:	
Nicholas Nypaver	31 (724)687-0771	
Name of Contact Person	at (724)687-0771 Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depar	tment of State.	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314



4:2:01

FLORIDA DEPARTMENT OF STATE Division of Corporations

December 11, 2020

NICHOLAS NYPAVER PO BOX 55 VALENCIA, PA 16059

SUBJECT: BILL FRANCE BOULEVARD BUSINESS PARK OWNERS'

ASSOCIATION INC.

Ref. Number: N05000011534

We have received your document for BILL FRANCE BOULEVARD BUSINESS PARK OWNERS' ASSOCIATION INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 920A00025055

Rebekah White Regulatory Specialist II Supervisor

www.sunbiz.org

FOR CORPORATIONS

Pursuant to the statement of cho	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: BILL FRANCE BOULEVARD BUSINESS PARK OWNERS' ASSOCIATION
2. The principal	office address: 116 NW 16TH AVE GAINESVILLE, FL 32601
_	address (if different): PO BOX 5369 GAINESVILLE, FL 32627
4. Date of incorp	poration/qualification: 11/14/2005 Document number: N05000011534
5. The name and Florida Depar	I street address of the current registered agent and registered office on file with the ament of State: (If resigned, enter resigned)
	RON FREDERICK
	560 S.Beach St
	Ormond Beach, FL 3217
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Nicholas Nypaver
	-508-Pittsburgh-Street-Suite-205 3245 S. Atlantic Ave. Suite 906
	-508-Pittsburgh-Street-Suite-205 3245 S. Atlantic Ave. Suite 906 P.O. Box NOT acceptable Mars-PA-16046 Daytona Beach, FL 32118
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by an officer so- board, or the corporation has been notified in writing of the change.
JZAN'M S	JOHNSON, Sections, RAND, S. JOHNSON Sec. Trag:
I hereby accept I further agree t of my duties, and document is beit corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address. I hereby confirm that the been notified in writing of this change.
	10-23-2020
·	nature of Registered Agent Date nalf of an entity:
Ty	s Ny Povar ped or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)