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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

OCT 0 8 2014 T. CARTER

RAPROChange

COVER LETTER

TO: Amendment Section Division of Corporations

Name of Corporation
NOCUMENT NUMBER. NO500011610

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:

Marnie Dale Ragan

Name of Contact Person

Gursky Ragan, P.A.

Firm/Company

14 NE 1st Avenue

Address

Miami, FL 33132

City/State and Zip Code

gfiegler@associaflorida.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Fiegler

Name of Contact Person

at (954 922-3514 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, nge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.	this	
1. The name of t	the corporation: ESTADA AT MONTERRA HOMEOWNERS' ASSOCIATION Office address: 10112 USA TODAY WAY MIRAMAR, FL 33025	LTION,	INC.
3. The mailing s	ddress (if different):		
4. Date of incor	poration/qualification: 11/16/2005 Document number: N050000116	310	
5. The name and	i street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)		
	JOANNE WILLOUGHBY	1	TAT 3S
	10112 USA TODAY WAY		LAH
	MIRAMAR, FL 33025	SEP 26	ASSE
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	t: Hd	OF STA
	GURSKY RAGAN P.A.	0	A COL
	14 NE 1st Ave, 2nd Floor		
	P.O. Box NOT acceptable Miami, FL 33132		
The street addr	ess of its registered office and the street address of the business office of its register be identical.	red agen	£,
-	as authorized by resolution duly adopted by its board of directors or by an officer s he board, or the corporation has been notified in writing of the change.		
July	Teffrey Saiden stat.		lent
() - 1	the appointment as registered agent and agree to act in this capacity, the appointment as registered agent and agree to act in this capacity, to complete my dulies, and I am familiar with and accept the obligation of my position as registed accument is being filed merely to reflect a change in the registered office addressing the corporation has been notified in writing of this change.	stered 33, I	
Man	9/22/2014 Plature of Agent Date		
_	shalf of an entity:		
Mamle Dal			
	yped or Printed Name		

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