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Division of Corporations

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From:

Account Name : THE FARR LAW FIRM

Account Number : 103654001666 Phone : (941)639-1158 Fax Number : (941)639-0028

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: <u>drdawc33950@gmail.co.w</u>

REGISTERED AGENT CHANGE

PUNTA GORDA PLAZA CONDOMINIUM ASSOCIATION, INC.

2023 JUL. 20 PH 6: 22

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From: Susaff A Roy - Fax: 19415059999 To: 8506176380@rcfax.com Fax: (850) 617-6380 Page: 4 of 4 07/20/2023 of DocuSign Envelope ID: 5D1E83B4-90A9-4301-968F-4D03A52A12F7 STATEMENT OF CHANGE OF REGISTERED AGENT OR BOTH FOR CORPORATIONS

	•	617.0502, 607.1508, or 617.1508, Florida Statutes, to on organized under the laws of the State of Florida	his
		or registered agent, or both, in the State of Florida.	
1. The name of	of the corporation: PUNTA GORDA	PLAZA CONDOMINIUM ASSOCIATION, INC.	
2. The princip	oal office address: 1900 TAMIAMI	TRL, SUITE A-B, PUNTA GORDA. FL 33950	
· · · · · · · · · · · · · · · · · · ·	 -		
3. The mailing	g address (if different); 1900 TAMI	AMI TRL. SUITE A-B, PUNTA GORDA, FL 33950	
4. Date of ince	orporation/qualification: 11/01/1984	Document number: N05956	
	and street address of the current regionartment of State: (If resigned, enter	istered agent and registered office on file with the resigned)	
	PATRICIA A. AMBERG		20.
	1923 CITRON STREET		2073
	PUNTA GORDA, FL 33980		~ ~ ~
6. The name a (if changed)	-	red agent (if changed) and /or registered office	1,0000 2 2
	DAVID PAULSON		<u>သ</u>
	1900 TAMIAMI TRAIL. SUITE	A-B	
		P.O. Box NOT acceptable	
	PUNTA GORDA, FL 33950		
The street add as changed wi	lress of its registered office and th ill be identical.	e street address of the business office of its registere	ed agent,
Such change vauthorized by	was authorized by resolution duly the board, or the corporation has l	adopted by its board of directors or by an officer so been notified in writing of the change.	
Day	sage of an officer or director	DAVID PAULSON Director	
I hereby accept I further agree of my duties, a document is b		Printed or typed name and nite gent and agree to act in this capacity, all statutes relative to the proper and complete per the obligation of my position as registered agent. G ye in the registered office address, I hereby confirm change.	formance Or, if this that the
(D. 10	1	7/20/2023	
क्रमण्डाम्याच्ये ह	ignature of Registered Agent	Date	
If signing on b	pehalf of an entity:		
Punta Gorda Pl	laza Condominium Association, Inc.	_	
	Typed or Printed Name		
	* * * FILI	NG FEE: \$35.00 * * *	