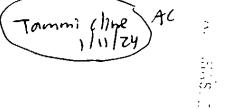
NOG 000000583

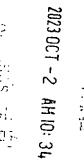
(R	Requestor's Name)
(A)	address)
(A	ddress)
(C	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	Business Entity Name)
(C	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
	Office Use Only
	Office Use Only

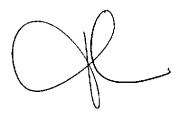


900421246119

10/02/23-+01044--004 **85.80







COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Wrenwood Condominium Association, Name of Corporation	, Inc.
DOCUMENT NUMBER: N06000000583	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Dale S. Hardaway	
Name of Contact Person	
Wrenwood Condominium Association, Inc.	
Firm/Company	
4810 Tangerine Ave	
Address	
Winter Park, FL 32792	
City/State and Zip Code	
wrenwoodcondominium@gm	nail.com
E-mail address: (to be used for future annual	l report notification)
·	20
For further information concerning this matter, p	please call: at (321
Delmarie Martinez, CAM	at (321) 422-0813 = 2
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	please call: at (321
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Stat in organized under the laws of the State of <mark>FLC</mark> ir registered agent, or both, in the State of Flor	DRIDA	
	he corporation: Wrenwood Condo	•		
2. The principal	office address: 4810 Tangerine Av	e Winter Park, FL 32792		
3. The mailing a	ddress (if different): same			
4. Date of incorp	oration/qualification: 01/19/2006	Document number: 90-0342768		
	street address of the current registment of State: (If resigned, enter	stered agent and registered office on file with t resigned)	he	
	Locasio, MaryJo			
	c/o Signature Management Solutio	ns, LLC.		2
	686 N. Hunt Club Blvd STE 180 L	ongwood FL 32779	÷.	023 OCT -2
6. The name and (if changed):	street address of the new register	ed agent (if changed) and /or registered office	: . : ://	
	Dale Hardaway, President		1 -	*
	4810 Tangerine Ave			AM 10: 31
	Winter Park, FL 32792	P.O. Box NOT acceptable		•
The street addre as changed will	ss of its registered office and the be identical.	street address of the business office of its re	gistered	agent,
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	dopted by its board of directors or by an officen notified in writing of the change.	cer so	
72°S	Harlara B	Dale S. Hardaway, President		
I hereby accept i I further agree to of my duties, and document is bein	the appointment as registered ago comply with the provisions of a lam familiar with and accept to filed merely to reflect a chang been notified in writing of this c.	Printed or typed name and title tent and agree to act in this capacity, all statutes relative to the proper and comple he obligation of my position as registered age in the registered office address, I hereby cohange.	te perfoi ent. Or onfirm th	mance if this hat the
75/	Landa Mills	01/08/2024		
Sign	ature of Registers Agent	Date		
If signing on bel	alf of an entity:			
Dale S. Hardaway	, President			
Ту	ped or Printed Name	•		

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

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