N0600001817

(Re	questor's Name)	
(Ad	dress)	
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT	
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer		
L		

700437780377

VU

Office Use Only

Occusign Envelope ID: 30270963-6456-474A-9D63-54DF46098B4E

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Tuscan Oaks Owners Association, Inc. Name of Corporation

DOCUMENT NUMBER: N0600001817

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:

Theresa DeVries	
Name of Contact Person	
Duval Realty Inc.	
Firm/Company	
6196 Lake Gray Blvd Suite 103	
Address	
Jacksonville, FL 32244	
City/State and Zip Code	
accounting@duvalrealtyinc.com	
E-mail address: (to be used for future annual report notificat	lion)

For further information concerning this matter, please call:

Theresa DeVries	at (⁹⁰⁴) ³⁶⁷⁻¹⁸¹⁸
Name of Contact Person	Area Cod	le & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

Docusign Envelope ID: 30270963-6466-474A-9D63-54DF46098B4E

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

1. The name of the corporation: Tuscan Oaks Owners Association. Inc.

2. The principal office address: ⁶¹⁹⁶ Lake Gray Blvd Suite 103 Jacksonville FL 32244

3. The mailing address (if different):

4. Date of incorporation/qualification: 02/16/2006 Document number: N06000001817

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RESIGNED

	I .
· · · · · · · · · · · · · · · · · · ·	
d street address of the new registered agent (if change	d) and /or registered of
	d) and /or registered of

Jacksonville, FL 32244

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.

Keutin Belin	Lauren Bolin, Treasurer
Signature of an officer or director	Printed or typed name and title

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. Thereby confirm that the corporation has been notified in writing of this change.

October 15, 2024

Date

Therese Denvice

4070BFDaD Signature of Registered Agent

If signing on behalf of an entity:

Theresa L. DeVries

6. Th (if

Typed 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 (\$10442)

CR2E045 (04/13)