

NO6000002537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

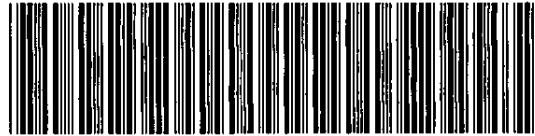
(Business Entity Name)

(Document Number)

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09/16/08--01030--002 **35.00

RA to chg

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 OCT 10 PM 3:37

FILED

T. Roberts OCT 10 2008



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2008

BETH MAKOWSKI
PATRIOT RESIDENTIAL MANAGEMENT SERVICES
12443 SAN JOSE BOULEVARD, STE 604
JACKSONVILLE, FL 32223

SUBJECT: BELLA CASA LUXURY CONDOMINIUMS ASSOCIATION, INC.
Ref. Number: N06000002537

We have received your document for BELLA CASA LUXURY CONDOMINIUMS 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 registered agent must sign accepting the designation.

The officer/director must sign below in the space provided on this form also.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 108A00050787

367-5980

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 OCT 10 AM 8:00

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bella Casa Luxury Condominium Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N06000002537

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:

Beth Makowski
(Name of Contact Person)

Patriot Residential Management Services, LLC.
(Firm/Company)

12443 San Jose Boulevard, Suite 604
(Address)

Jacksonville, FL 32223
(City/State and Zip Code)

For further information concerning this matter, please call:

Beth Makowski at (904) 483-5160
(Name of Contact Person) (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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Bella Casa Luxury Condominium Association, Inc.
2. The principal office address: 13060 Plantation Road, Fort Myers, FL 33912
3. The mailing address (if different): 12443 San Jose Boulevard, Suite 604, Jacksonville, FL 32223
4. Date of incorporation/qualification: 03/06/2006 Document number: N06000002537

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Charles E. Wiley

15051 South Tamiami Trail, #203

Fort Myers, FL 33908

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Patriot Residential Management Services, LLC.

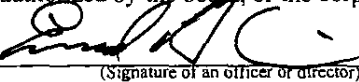
12443 San Jose Boulevard, Suite 604

(P.O. Box NOT acceptable)

Jacksonville, FL 32223

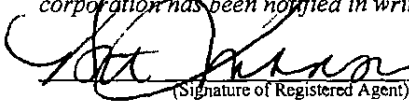
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

X 
(Signature of an officer or director)

8-27-08 Edward P. Adkins MM.
(Printed or typed name and title) **MANAGING MEMBER**

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, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

08/27/08

(Date)

If signing on behalf of an entity:

Beth Makowski

(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
CR2E045 (8/05)