

N06000005549

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2015 JUN -1 PM 4:02
TALLAHASSEE, FLORIDA
STATE

JUN 05 2015
A RAMSEY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Las Palmas at Port St. Lucie Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N06000005549

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:

Deborah L. Ross, Esquire
Name of Contact Person

Ross Earle & Bonan, P.A.
Firm/Company

789 SW Federal Highway, Suite 101
Address

Stuart, FL 34994
City/State and Zip Code

dlr@reblawpa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah L. Ross, Esquire at **772 287-1745**
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: Las Palmas at Port St. Lucie Homeowners Association, Inc.

2. The principal office address: 6417 Las Palmas Way, Port Saint Lucie, FL 34952

3. The mailing address (if different): P.O. Box 7806, Port Saint Lucie, FL 34985

4. Date of incorporation/qualification: 5/22/06 Document number: N06000005549

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)

Gyory, Janos

4863 SW 147 Place

Miami, FL 33185

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

Deborah L. Ross, Esquire/Ross Earle & Bonan, P.A.

789 SW Federal Highway, Suite 101

P.O. Box NOT acceptable

Stuart, FL 34994

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.

Andrew Bowen
Signature of an officer or director

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

[Signature]
Signature of Registered Agent

5/14/15
Date

If signing on behalf of an entity:

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