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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 Fl.______ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Notting Hill at Oakmonte Condominium Association, Inc.

2. The principal office address: C/O FirstService Residential

2300 Maitland Center Pkwy, Suite 101, Maitland, FL 32751

3. The mailing address (if different): _

4. Date of incorporation/qualification: 06/05/2006 Document number: N06000006033.

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)

ARIAS BOSINGER, PLLC

845 E NEW HAVEN AVE

MELBOURNE, FL 32901

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

C T Corporation System

1200 South Pine Island Road

P.O. Box: NOT acceptable

Plantation, Florida 33324

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.

Williams Tony Signature of an officer or director

Norman Williams President

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.

By:	C T Corporation System	09/10/2024
	Signature of Registered Agent	Date
	If signing on behalf of an entity:	

Terrie Bates, Assistant Secretary

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 (04/13)