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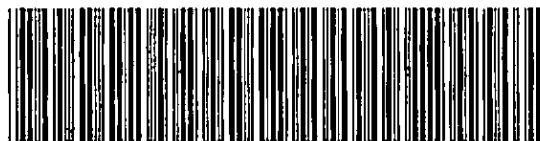
(Business Entity Name)

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C. GOLDEN

MAR 29 2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Salt Springs Resort Cottages Condominium
Name of Corporation Association, Inc

DOCUMENT NUMBER: NO6000007714

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:

Ed Mayer
Name of Contact Person

Salt Springs Resort Cottages Condo Assn
Firm/Company

14100 N Highway 19, Suite A
Address

Salt Springs, FL 32134
City/State and Zip Code

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

For further information concerning this matter, please call:

Ed Mayer at (352) 685-1900
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$55.00 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

lm

**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: Salt Springs Resort Cottages Condominium Association Inc.
2. The principal office address: 14100 N Highway 19, Suite A
Salt Springs, FL 32134
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7/20/2006 Document number: HO6000007714

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)

Skates, Jeffrey
1028 Lake Sumter Landing
The Villages, FL 32162

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

Eduard Mayer
14100 N Hwy 19, Suite A
Salt Springs, FL 32134

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]
Signature of an officer or director

EDUARD D. MAYER
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.

X [Signature]
Signature of Registered Agent

MAY 27 2018
Date

If signing on behalf of an entity:

Typed or Printed Name

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