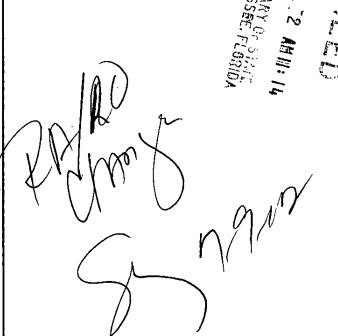
| (Requestor's Name) | |
|---|---------------|
| (Address) | 300236910 |
| (Address) | |
| (City/State/Zip/Phone #) | 07/02/1201044 |
| PICK-UP WAIT MAIL | 07/02/1201044 |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
| | 107 |
| | |
| | 1 / Minor |
| | |

Office Use Only



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COVER LETTER

| Amendment Section Division of Corporations | | |
|---|--|--|
| SUBJECT: Jensen Beach Club Phase II Homeowners Association, Inc. Name of Corporation | | |
| • | | |
| DOCUMENT NUMBER: N0600011126 | | |
| 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: | | |
| John Leighton | | |
| Name of Contact Person | | |
| | | |
| Firm/Company | | |
| Firm/Company | | |
| P.O. Box 1273 | | |
| Address | | |
| Stuart, FL 34995 | | |
| City/State and Zip Code | | |
| jsleightoniii@bellsouth.net | | |
| E-mail address: (to be used for future annual report notification) | | |
| , | | |
| For further information concerning this matter, please call: | | |
| - · · · · · · · · · · · · · · · · · · · | | |
| John Leighton Name of Contact Person at (772) 263-0500 Area Code & Daytime Telephone Number | | |
| 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 Street Address: Amendment Section | | |
| Division of Corporations Amendment Section Division of Corporations | | |
| P.O. Box 6327 Clifton Building | | |
| Tallahassee, FL 32314 2661 Executive Center Circle | | |
| Tallahassee, FL 32301 | | |

CR2E045 (03/12)

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: Jensen Beach Club Phase II Homeowners Association, Inc. | | |
| 2. The principal office address: Shore_ | | |
| | | |
| 3. The mailing address (if different): P.O. BOX 1273 | | |
| 4. Date of incorporation/qualification: 10/24/06 Document number: N06000011126 | | |
| 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) | | |
| Ron Brown | | |
| 2400 SE Monterey Rd., Suite 100 | | |
| Stuart, FL 34996 | | |
| 6. The name and street address of the new registered agent (if changed) and /or registered offices (if changed): | | |
| Leighton Construction, LLC. | | |
| 210 SE Coconut Ave. | | |
| P.O. Box NOT acceptable | | |
| Stuart, FL 34996 | | |
| 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. | | |
| Signature of an officer of director Tour S. LETGH Jon, FIT Pres. 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 of Registered Agent Date | | |
| If signing on behalf of an entity: | | |
| JOHN S. LEZGH TON ET | | |

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