

NOL 00001786  
Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : DELOACH, HOFSTRA & CAVONIS, P.A.  
Account Number : I19990000123  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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2023 NOV 30 PM 4:36

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REGISTERED AGENT CHANGE  
LAS PALMAS TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

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November 29, 2023

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LAS PALMAS TOWNHOMES HOMEOWNERS ASSOCIATION, INC.  
PO BOX 2297  
PINELLAS PARK, FL 33780

SUBJECT: LAS PALMAS TOWNHOMES HOMEOWNERS ASSOCIATION, INC.  
REF: N06000011786

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

List the current Registered Agent.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan  
Regulatory Specialist III

FAX Aud. #: E23000406285  
Letter Number: 123A00027201

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 TOWNHOMES HOMEOWNERS ASSOCIATION, INC.
- 2. The principal office address: 600 S CLEVELAND MASSILLON ROAD, FAIRLAWN OH 44333
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 540 1st ST SE Document number: NO6000011785
- 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)

ii MICHAEL J. SALONE  
ii 7901 NW 33RD STREET #3  
ii HOLLYWOOD FL 33024

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

DeLOACH, HOFSTRA & CAYONIS, P.A.  
3640 SEMINOLE BLVD.  
P.O. Box NOT acceptable  
SEMINOLE FL 33772

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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.

JK  
 \_\_\_\_\_  
 Signature of an officer or director

JOSHUA KITNER, PRESIDENT  
 \_\_\_\_\_  
 PRESIDENT OF REGISTERED AGENT

*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

11/23/23  
 \_\_\_\_\_  
 Date

If signing on behalf of an entity:

JOSEPH M. MURPHY, ESQ  
 \_\_\_\_\_  
 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 (6-11-13)