NO 700000 1556

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
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(50	odinent (validet)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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Office Use Only



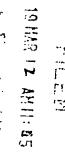
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COVER LETTER

TO: Amendment Section Division of Corporations				
ENCLAVE AT THREE HUNDRED HOMEOWNERS' ASSOCIATION, INC. SUBJECT:				
Name of Corporation				
DOCUMENT NUMBER: N0700001556				
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:				
David Hoffman				
Name of Contact Person				
Omega Community Management, Inc.				
Firm/Company				
7145 Turner Road, Suite 101				
Address				
Rockledge, Florida 32955				
City/State and Zip Code				
dhoffman@omegacmi.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
David Hoffman Name of Contact Person at (321 757-7902 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 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

statement of cha	provisions of sections 607.0502, 61 inge is submitted for a corporation or ir to change its registered office or i	organized under the laws of the	State of Florida		
1. The name of t	the corporation: ENCLAVE AT THR	EE HUNDRED HOMEOWNER	RS' ASSOCIATION, INC.		
2. The principal	office address: 7145 Turner f ge, Florida 32955	Road, Suite 101			
3. The mailing a	nddress (if different): 7145 Turr dge, Florida 32955	ner Road, Suite 101			
	poration/qualification: 02/12/20	07 Document number:	N07000001556		
	I street address of the current register tment of State: (If resigned, enter re		on file with the		
	Vega, Frank J				
	363 Felice Place				
	Cocoa Beach, Florida 32	2931	6 19 HA		
6. The name and (if changed):	l street address of the new registered	l agent (if changed) and /or regi	stered office: 2 F		
	Omega Community Man	agement, Inc.			
	7145 Turner Road, Suite 101				
	Rockledge, Florida 3295	NOT acceptable			
The street addre	ess of its registered office and the s be identical.	treet address of the business of	fice of its registered agent,		
Such change wa authorized by th	as authorized by resolution duly add the board, or the corporation has been	opted by its board of directors on notified in writing of the cha	or by an officer so inge.		
- Fum Signatur	ki lightre of aphilicer or director	Frank Vega - Director/President			
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm	(f) the appointment as registered ager to comply with the provisions of all my duties, and I am familiar with a s document is being filed merely to that the corporation has been notif	• • • • • • • • • • • • • • • • • • • •			
Lavis	ature of Registered Agent	02/20/2019			
	,	Date			
it signing on bei	half of an entity:				
Ту	ped or Printed Name				

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

Make checks payable to Florida Departmen