N07000006685

| (Requestor's Name) |
|---|
| |
| (Address) |
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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ŭ3/18/17--01013--067 **35.00



2/1/0/

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| 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. | | |
|--|--|---|
| | | the corporation: TUSCANA III CONDOMINIUM ASSOCIATION, INC. |
| | | office address: 1395 Tuscana Lane, Champions Gate, FL 33896 |
| 3. | The mailing a | ddress (if different): |
| 4. | Date of incorp | poration/qualification: Document number: N07000006685 |
| 5. | The name and Florida Depar | street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned) |
| | | Garfinkel, Katzman |
| | | 5297 West Copans Raod |
| | | Margate, FL 33063 |
| 6. | The name and (if changed): | Margate, FL 33063 Street address of the new registered agent (if changed) and /or registered office Garfinkel Whynot 300 N Miatland Avenue |
| | | Garfinkel Whynot |
| | | 300 N Miatland Avenue |
| | | P.O. Box NOT acceptable Maitland, FL 32751 |
| | ^ | ess of its registered office and the street address of the business office of its registered agent, be identical. It is authorized by resolution duly adopted by its board of directors or by an officer so be board or the corporation has been notified in writing of the change. |
| _ | λ_{Δ} | re of an officer or director Printed or typed name and title |
| pe as | urtnenagree i erformance of zent. Or, if the | the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is apcument is being filed mercly to reflect a change in the registered office address, I all the corporation has been notified in writing of this change. |
| Z If | | that of an entity: |
| E | rik Whyno | |
| | | /ped 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 (03/12)