## N08000000252

| (Requestor's Name)                        | ,   |
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| (Address)                                 |     |
| (Address)                                 | *   |
|   |     |
| (City/State/Zip/Phone #)                  |     |
| PICK-UP WAIT M                            | AIL |
| (Duninger Entity Name)                    |     |
| (Business Entity Name)                    |     |
| (Document Number)                         |     |
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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

R.A.

TB 4-77-8

## **COVER LETTER**

| TO:     | Amendment Section Division of Corporations  |         |
|---------|---|---------|
| SUBJI   | JECT: PLAZA AT OCEANSIDE PROPERTY OWNERS' ASSOC. INC.  (Name of Corporation)  |         |
| DOCU    | UMENT NUMBER:_N08000000252  | •       |
| The en  | nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  |         |
| Please  | e return all correspondence concerning this matter to the following:  |         |
|         | Maritza Betancourt, Esq. (Name of Contact Person)   |         |
|         | Betancourt, Mena & Associates (Firm/Company)  |         |
|         | 19 West Flagler St, Ste 720 (Address)   |         |
|         | Miami, Florida 33130<br>(City/State and Zip Code)   |         |
| For fur | orther information concerning this matter, please call:   |         |
|         | Maritza Betancourt, Esq. at ( 305 ) 579-0021 (Name of Contact Person) (Area Code & Daytime Telephone N  | Number) |
| Enclos  | sed 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 ch                   | e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this cange is submitted for a corporation organized under the laws of the State of Florida, 33154 ler to change its registered office or registered agent, or both, in the State of Florida.  |
|-----------------------------------|---|
| 1. The name of                    | f the corporation: PLAZA AT OCEANSIDE PROPERTY OWNERS' ASSOCIATION, INC. I  |
|                                   | office address: 24301 WALDEN CENTER DRIVE SUITE 300, Bonita Springs, Florida  |
| 3. The mailing                    | address (if different):   |
| 4. Date of incor                  | rporation/qualification: 01/08/2008 Document number: N0800000252  |
|                                   | nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)  |
|                                   | Vivien N. Hastings  |
|                                   | 24301 Walden Center Drive, Ste 300  Ropita Springs El. 34134  |
|                                   | Bonita Springs, FL 34134  |
| 6. The name and (if changed):     | nd street address of the new registered agent (if changed) and /or registered office  |
|                                   | Maritza Betancourt, Esq., Betancourt, Mena & Assoc.   |
|                                   | 19 West Flagler St, Ste 720  (P.O. Box NOT acceptable)  |
|                                   | Miami, Florida 33130  |
| The street addr<br>as changed wil | ress of its registered office and the street address of the business office of its registered agent, il be identical.   |
| Such change wauthorized by t      | vas authorized by resolution duly adopted by its board of directors or by an officer so the board of the corporation has been notified in writing of the change.  |
|                                   | Michael Patrizio lesident  (Printed or typed name and title)  |
| I l l                             | t the appointment as registered agent and agree to act in this capacity.  It to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this given the proper and the registered agent is the confirmation of the registered office address, I hereby confirmation as being being filed in writing of this change. |
|                                   | #/16/09   |
|                                   | inglande of Registered Agent) (Date)  |
| it signing on be                  | ehalf of an entity:   |
|                                   | (Typed or Printed Name)   |

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