## N080000044444

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## **COVER LETTER**

Division of Corporations					
SUBJECT: JULIETTE FALLS HOMEOWNERS AS Name of Corpo	SSOCIATION, INC.				
DOCUMENT NUMBER: N08000	0004444				
The enclosed Statement of Change of Registered Office/Ag	gent and fee are submitted for filing.				
Please return all correspondence concerning this matter to	the following:				
SHERMAN D. LEI	NSKE, Esq.				
Name of Contac	t Person				
LENSKE, LENSKE 8					
Firm/Comp	any				
6400 Canoga Avenu	ue, Suite 315				
Woodland Hills, CA 91367					
City/State and Zip Code					
rwengel@verizon.net					
E-mail address: (to be used for futur					
For further information concerning this matter, please call:					
Sherman D. Lenske, Esq.	t ( 818 ) 716-1444 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

TO: Amendment Section

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

statement of chan	ge is submitted for a co	rporation organized	107.1508, or 617.1508, Flo I under the laws of the Stat I agent, or both, in the Stat	te of Florida
	•		HOMEOWNERS A , Dunnellon, Florida	ASSOCIATION, INC. 34432
3. The mailing ad	dress (if different):			
4. Date of incorpo	pration/qualification:	May 6, 2008	Document number:	N08000004444
	street address of the curn ment of State: (If resigne	•	t and registered office on f	ile with the
<u>-</u>	JEFFREY C. FINK	<b>E</b>		
_	17985 S.W. 64th P	lace		77 20 14.55 14.55
<u> </u> -	Dunnellon, Florida	34432		
6. The name and s (if changed):	street address of the new	registered agent (if	f changed) and /or registere	ed office A
<u>_</u>	RONALD CLAPPE	R		
9	6821 Danah Court	P.O. Box NOT acc		
<u> </u>	Fort Myers, Florida		ершоге	
The street address as changed will b	s of its registered office e identical.	e and the street add	ress of the business office	e of its registered agent,
Such change was authorized by the	authorized by resolution board, or the corporate	on duly adopted by ion has been notifie	its board of directors or led in writing of the chang	by an officer so e.
Signature	of an officer or director		RONALD CLAPP	ER, President
I hereby accept th I further agree to of my duties, and document is beins corporation has b	te appointment as regis comply with the provis I am familiar with and g filed merely to reflect been notified in writing	stered agent and ag sions of all statutes accept the obligate a change in the re of this change.	gree to act in this capacity relative to the proper an ion of my position as regi gistered office address, I	y. d complete performance stered agent. Or, if this hereby confirm that the
7		<del>-</del>	9/29/11	
RONALD CLA f signing on beha			Date	
Турс	ed or Printed Name	<u>.</u>		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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