## N0800007211

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		:

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FILED STATE SECRETARY OF STATE TALLAHASSEE, FLORIDA

JAN 2 1 2015 T. CARTER

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUNFISH CONDOMINIUM ASSOCIATION, INC.
Name of Corporation
N0800007211
DOCUMENT NUMBER:
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:
Frances Chames
Name of Contact Person
Suntish Condominium Firm/Company
3131 Fulton ST E
Grand Rapids MI 49306 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Frances Chawes at (616) 443-4914  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:

## 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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Sunfish Condominium Association, INC.
2. The principal office address: 102 55th 5t. Holmos Boach ty
34217
3. The mailing address (if different): 3131 Fulton ST E
Grand Rapids, MI 99500
4. Date of incorporation/qualification: 7/29/2008 Document number: NO800007211
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)
ROBERT Champs (Resigned)
104 55th
Holmes Beach F1 34217 20 SERT
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
trances Champs 5
102 554
P.O. Box NOT acceptable
Holmes Beach F1 34217
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.
Signature of an officer or director  Rosser C. Homes  Printed or typed name and title
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 1/9/2015 Date
If signing on behalf of an entity:
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