N0800009901

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Linty Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





400234261964

05/04/12--01021--029 **35.00



MAY 7 2012 C. MUSTAJI

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

statement of chang	ovisions of sections 607.0502, 617.0502 se is submitted for a corporation organi o change its registered office or registe	zed under the laws of the State of $_$	Florida
1. The name of the	corporation: Northridge Comme	ercial Park Owners Assoc	iation Inc
2. The principal of	fice address: 3760 NW 83rd St.,	, Ste 1, Gainesville, FL	32606
3. The mailing add	lress (if different):same		76 TA 12
4. Date of incorpor	ration/qualification; _ 5-21-2009		09901
	treet address of the current registered agnent of State: (If resigned, enter resigned		
_	Resigned		FEOM
_			- DA
6. The name and s (if changed):	treet address of the new registered agen	nt (if changed) and /or registered off	- ice
_	Andrew Hodor		_
_	3760 NW 83rd St., Ste 1, 6	Gainesville, FL 32606	-
The street address as changed will b	s of its registered office and the street	address of the business office of it	ts registered agent,
Such change was authorized by the	authorized by resolution duly adopted board, or the corporation has been no	d by its board of directors or by an stiffed in writing of the change.	officer so
Signature	of an officer or director	Andrew Hodor - Directo	
I hereby accept il I further agree to of my duties, and document is bein corporation has b	ne appointment as registered agent an comply with the provisions of all stat I am familiar with and accept the obl 3 filed merely to reflect a change in th been notified in writing of this change.	d agree to act in this capacity, utes relative to the proper and con igation of my position as registere e registered office address, I here	nplete performance d agent. Or, if this by confirm that the
4		5-3-2012	
J	ture of Registered Agent	Date	
If signing on beha	alf of an entity:		
Andrew Hodo	red or Printed Name		
	* * * FILING FE	EE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)