

## N0900000 472

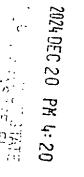
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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12/20/24--01011--005 \*\*85.00



## COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ Name	ECT: Lago Mar Homeowners Association of Corporation	
DOCU	JMENT NUMBER: N090000000472	
The cr	nclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	matter to the following:
Sean (	•	
Name	of Contact Person	
-	Mar Homeowners Association	
	Company	
	ago Mar Lane	
Addre		
	Raton FL 33431	
City/S	tate and Zip Code	
	smgulley@gmail.com	
E-mai	l address: (to be used for future annual	report notification)
For fu	rther information concerning this matter, p	lease call:
Sean (	Gulley Name of Contact Person	at (617) 905-1465 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the	Department of State
CR2E0	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

statement of cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Statutes, this norganized under the laws of the State of	-		
	the corporation: Lago Mar Homeo				
2. The principal	office address: 950 Lago Mar Lane	e, Boca Raton, FL 33431	<del>-</del>		
3. The mailing a	ddress (if different):		_ 		
4. Date of incom	4. Date of incorporation/qualification: 01/14/2009 Document number: N09000000472				
	I street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)			
	resigned				
		2024 0	<sup>94</sup> 5=4		
6. The name and (if changed):		red agent (if changed) and /or registered office $\frac{20}{20}$ PM 4: 20	FILED		
	0501 Man I D D				
	950 Lago Mar Lane, Boca Raton, FL 33431  P.O. Box NOT acceptable				
The street addre	ess of its registered office and the be identical.	e street address of the business office of its registered agei	nt.		
Such change wa authorized by th	as authorized by resolution duly a ne board of the corporation has b	adopted by its board of directors or by an officer so been notified in writing of the change.			
Signatur	heat an office of director	Stephen Ottley NOA pre	ridon		
I hereby accept I further agree to of my duties, an document is being corporation for	the appointment as registered as to comply with the provisions of a d I am familiar with and accept to ng filed merely to reflect a chang heen nougled in writing of this o	gent and agree to act in this capacity. all statutes relative to the proper and complete performan the obligation of my position as registered agent. Or, if to ge in the registered office address, I hereby confirm that to change.	ice his he		
		12/17/24			
Sign	nature of Registered Agent	Date	_		
	half of an entity:				
SEAN (	<del></del>	_			
T	ypod or Printed Name				

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