

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**REGISTERED AGENT CHANGE
WESTCLIFFE ESTATES AT TRADITION HOMEOWNERS
ASSOCIATI**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JAN -7 PM 3:28

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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RECEIVED



January 4, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

WESTCLIFFE ESTATES AT TRADITION HOMEOWNERS ASSOCIATION
10489 SW MEETING STREET
PORT ST LUCIE, FL 34987

SUBJECT: WESTCLIFFE ESTATES AT TRADITION HOMEOWNERS ASSOCIATION INC
REF: N09000000642

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Our records do not reflect CT Corporation System as the current registered agent for the above corporation. Please check our records for the name of the current agent and revise your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Thelma Lewis
Document Specialist Supervisor

FAX Aud. #: H13000002399
Letter Number: 713A00000235

Please keep original file date.

*Thank you,
Angela*

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

1. The name of the corporation is: Westcliffe Estates at Tradition Homeowners Association Inc.
2. The principal office address: 10489 SW MEETING STREET
PORT ST LUCIE FL 34987
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1/22/2009 Document Number: N09000000642
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:


FISHKIND & ASSOCIATES, INC.
10807 SW TRADITION SQUARE
PORT ST LUCIE FL 34987

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporate Creations Network Inc.
11380 Prosperity Farms Road #221E
(P.O. Box Not acceptable)
Palm Beach Gardens FL 33410

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)

by Angela Martin as attorney-in-fact
(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)

01/03/2013
(Date)

If signing on behalf of an entity:

Angela Martin, Special Secretary
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

Corporate Creations International Inc.
11380 Prosperity Farms Road #221E
Palm Beach Gardens FL 33410
(561) 694-8107

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