

NO9000002876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

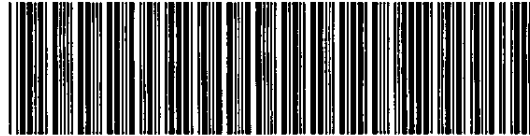
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2015

LAURIE A. DENNY
CONCEPT COMPANIES
3917 NW 97TH BLVD.
GAINESVILLE, FL 32606

SUBJECT: BASCOM SQUARE SOUTH CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N09000002876

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 815A00024106

Attached is the signed document.
Thank you

RECEIVED

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bascom Square South Condominium Association
Name of Corporation

DOCUMENT NUMBER: N09000002876

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:

Laurie A. Denny

Name of Contact Person

Concept Companies

Firm/Company

3917 NW 97th Blvd.

Address

Gainesville, Florida 32606

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laurie A. Denny

Name of Contact Person

at (352) 333-3233

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR 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 Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Bascom Square South Condominium Association
2. The principal office address: 3917 NW 97th Blvd., Gainesville, Florida 32606
3. The mailing address (if different): Same

4. Date of incorporation/qualification: March 20, 2009 Document number: N09000002876

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)

Brian S. Crawford

3917 NW 97th Blvd., Gainesville, Florida 32606

RESIGNED

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

Jack Muenchen

1140 SW Bascom Norris Drive

P.O. Box NOT acceptable

Lake City, Florida 32025

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

Brian S. Crawford, Director

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

10/20/15

Date

If signing on behalf of an entity:

Jack Muenchen

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

CR2E045 (03/12)

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