

N/10096

No Return Address

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

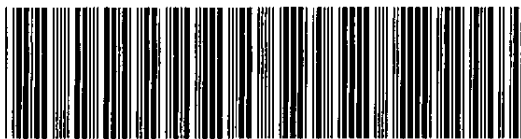
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/21/07--01069--001 **35.00

APPROVED
AND
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07 NOV 21 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. A. Chang

G. Goulette NOV 28 2007

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Mandarin Glen Condominium Association, Inc.
2. The principal office address: 11512 Lake Mead Avenue, Suite 405
Jacksonville, FL 32256
3. The mailing address (if different): 7643 Gate Parkway, Suite 104 PMB 188
Jacksonville, FL 32256
4. Date of incorporation/qualification: _____ Document number: N10096
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

James W. Hart, Jr.
Senley Management, Inc.
2180 W SR 434, Suite 5000
Longwood, FL 32779

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

Kim Balaskiewicz, Madison Property Management
11512 Lake Mead Avenue, Suite 405
Jacksonville, Florida 32256
(P.O. Box NOT acceptable)

Solutions, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

Leona E. Carver
(Signature of an officer or director)

Leona E. Carver - Treasurer
(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.

Kim Bz
(Signature of Registered Agent)

11/1/17
(Date)

If signing on behalf of an entity:

Kim Balaskiewicz
(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