110652

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	





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SECRETARY OF STALL UPVISION OF CORPORATION

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COVER LETTER

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TO: Amendment Section Division of Corporations

BJECT: The OAKS AT LOON TRYSIDE I CONDUMINIUM ASSOCIATION FRO Name of Corporation
OCUMENT NUMBER: N/0652
e enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
rase return all correspondence concerning this matter to the following:
Charles KUNATH Name of Contact Person
BIC Community MANAGement Firm/Company
3504 Ridge Blud Address
PAIN HARBOT, F1 34684 City/State and Zip Code
BANDCOMMONITY MANAGEMENT & GMAIL COM E-mail address: (to be used for future annual report notification)
r further information concerning this matter, please call:
Charles & Kunaiii at (727) 239-5991 Name of Contact Person 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
1. The name of the corporation: The DAKS AT COUNTRYSIDE I Condominion ASSOCIATION, 2. The principal office address: 3504 Ridge Blud, PAlm HALBOR, FI 34689
.3. The mailing address (if different): 3-584 RIBEC Brod, SAME AS ABOUR
4. Date of incorporation/qualification: 891985 Document number: N10652
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)
Scannanino, INC
720 Brefer Gook And Soitt 100
720 Box fee (jeek Be) Soji + 100 CLD Smax, Fi 3467 6. The name and street address of the new registered agent (if changed) and for registered office
(if changed):
B+C Commonity Management
3504 Ridge Blod PO Box NOI acceptable
PAIN HARBOT, FI 34684
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.
LORI Bruce LORI Bruce 720ASUSCR. Signature of an officer of director Printed or typed pame 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 Date
If signing on behalf of an entity:
Charles E. Kura 774 Typed or Printed Name
Typed or Printed Name

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