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## N11000000112

(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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Office Use Only



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R.A.

MAY 3 0 2012

T. BROWN

## **COVER LETTER**

	nent Section of Corporations			÷	
SUBJECT:	Lakoya I Sub-Ne	eighborhood Name of Corpo	Association,	Inc.	
DOCUMENT N	UMBER:	N11000	000712		
The enclosed Sta	tement of Change of Regi	stered Office/Ag	ent and fee are sub	mitted for filing.	
Please return all	correspondence concernin	g this matter to the	ne following:		
		Wendy Mur Name of Contact	ray Person		
Associa Gulf Coast Firm/Company					
	1	<del>2659 Whiteha</del> Address	HDrive 1346	HIDI TION	3LVD
	F	ort Myers, FL City/State and Zi	33907 33917 Code		
	E-mail address: (to be	ine@bensons used for future	inc.com annual report no	tification)	
For further inform	nation concerning this mat	ter, please call:			
11	Dianne Racine	at	( 239 )	277-0718	
	.00 check made payable to			rume reiepnone Number	

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: Lakoya I Sub-Neighborhood Association, Inc.
2. The principal office address: 12650 Whitehall Drive, Fort Myers, FL 33907
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/24/11 Document number: N11000000712
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)
Chad Kocses 25 SEC
2647 Professional Circle Suite 1201
Naples, FL 34119
Chad Kocses  2647 Professional Circle Suite 1201  Naples, FL 34119  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Associa Gulf Coast
Associa Gulf Coast
-12650 Whitehall Drive 13461 PARKER COMMONS BLVD #101+10
P.O. Box NOT acceptable Fort Myers, FL 33907 33912
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.  Chad Kocses
Signal of an officer or director Printed or typed name and title
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 if my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this locument 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.
4/30/12 Signature of Registered Agent Date
f signing on behalf of an entity:  Wendy Murray Typed or Printed Name  Code: 6050  ### Pile Pile
Wendy Murray
Typed or Printed Name

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