N11000000715

(Re	equestor's Name)			
(Ac	idress)			
. (Ac	ldress)			
(Cit	ty/State/Zip/Phone	p #)		
PICK-UP	WAIT	MAIL		
(Bu	isiness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
,				

Office Use Only



500235544345

05/29/12--01011--031 **35.00

DIVISION OF CORPORATION:

R.A.

MAY 3 0 2012 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Lakoya III Sub-Neighborhood Association, Inc. Name of Corporation
DOCUMENT NUMBER: N11000000715
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:
Wendy Murray
Wendy Murray Name of Contact Person
Associa Gulf Coast
Associa Gulf Coast Firm/Company 13461 PARKER COMMONS BLX SUITE 101+102
42650 Whitehall Drive
Address
Fort Myers, FL 33907 33912 City/State and Zip Code
dracine@bensonsinc.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dianne Racine at (239) 277-0718 Name of Contact Person Area Code & Daytime Telephone Number
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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S hange is submitted for a corporation organized under the laws of the State of $ar{f f}$		
	der to change its registered office or registered agent, or both, in the State of F		
1. The name of	f the corporation: Lakoya III Sub-Neighborhood Association	, Inc.	
2. The principa	al office address: 12650 Whitehall Drive, Fort Myers, FL 33907		
+			
3. The mailing	address (if different):		
4. Date of incor	proration/qualification: 1/24/11 Document number: N	11000000715	
	nd street address of the current registered agent and registered office on file wit artment of State: (If resigned, enter resigned)	h the	OV
	Chad Kocses	MAY	SIOR
	2647 Professional Circle Suite 1201	Y 29	ETAR OF (
	Naples, FL 34119	. 3	32 YE
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered offi	マ	STATE
	Associa Gulf Coast	-	ক্র
	12650 Whitehall Drive 13461 PARKER COMMONS	3LVD#101	+103-
	P.O. Box NOT acceptable	•	
	Fort Myers, FL 33997 33-412	-	
The street addrass changed will	ress of its registered office and the street address of the business office of its libe identical.	s registered agent,	
Such change wauthorized by t	vas authorized by resolution duly adopted by its board of directors or by an the board, of the corporation has been notified in writing of the change.		
	Chad Kocses		
=	we of an officer or director If the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comply with the provisions of all statutes relative to the proper and complet amiliar with and accept the obligation of my position as registered into filed-merely to reflect a change in the registered office address. I hereby the provision of this change.		
[]/Just.	4/30/12		
/ "	gnature of Registered Agent Date	250	
	wendy Murray Iyped or Printed Name Code: Celebrate 5/4	0×1-	
T	<i>'</i>	Ba	
	* * * 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 (8/05)