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COVER LETTER

TO: Amendment Section Division of Corporations

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SUBJECT: Pointe Vista Condominium Association, Inc.

Name of Corporation

DOCUMENT NUMBER. N11000002348

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:

John Rondolino, President

Name of Contact Person

Pointe Vista Condominium Association, Inc.

Firm/Company

1050 W. Pointe Vista Path

Address

Hernando, Florida 34442

City/State and Zip Code

PVCA.BOD@gmail.com

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

For further information concerning this matter, please call:

John Rondolino, President at 352 533-4800

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida inge is submitted for a corporation organized under the laws of the State of r to change its registered office or registered agent, or both, in the State of A	Florida		_
1. The name of t	he corporation: Pointe Vista Condominium Association,	Inc.		
2. The principal	office address: 3600 E. Gulf To Lake Highway			
	Inverness, Florida 34453			_
3. The mailing a	ddress (if different): 1050 W. Pointe Vista Path			
	Hernando, Florida 34442			
4. Date of incorp	poration/qualification: March 3, 2011 Document number: N110	0000	2348	
	I street address of the current registered agent and registered office on file water that the state: (If resigned, enter resigned)	rith the		
	Integrity Tax & Bookkeeping LLC	_		
	4411 E Arlington Street			
	Inverness, Florida 34453	Eco	20	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	ffice	71 AON 9102	77
	Humphrey & Saltmarsh, PL		A	
	3600 E. Gulf To Lake Highway		స్	\bigcirc
	P.O. Box NOT acceptable Inverness, Florida 34453	 	00	
The street addre	ess of its registered office and the street address of the business office of i be identical.	ts regist	ered ag	ent,
	as authorized by resolution duly adopted by its board of directors or by an ne board, or the corporation has been notified in writing of the change. Digitally signed by PVCA-BOD			
PVCA-	BOD DN: cn=PVCA-BOD, o, ou, email=PVCA-BOD on Color BOD o			_
I further agree to performance of	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 commy duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered offithat the corporation has been notified in writing of this change.	n as reg	gistered ess, I	ı
Janin W	Saltmash 1192019 Date Date	······································		
If signing on be	chalf of an entity:			
Jonice	MSaltmansh yped or Printed Name			

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