N11000010883

(Requestor's Name)			
(Address)			
(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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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: San Jose Professional Park Condomini Name of Corporation	iums Association, Inc.
DOCUMENT NUMBER: N11000010883	
The enclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Jason S. Allen	
Name of Contact Person	
Jason S. Atlen, DDS, MS, PA	
Firm/Company	
12078 San Jose Blvd., Suite 3	
Address	
Jacksonville, FL 32223	
City/State and Zip Code	
jasonscott.allen@gmail.com	
E-mail address: (to be used for future annua	d report notification)
,	
For further information concerning this matter.	please call:
For further information concerning this matter.	please call: at (301) 335-7393 Area Code & Daytime Telephone Number

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	•	7.0502, 607.1508, or 617.1508, Florida Statu organized under the laws of the State of <mark>Flori</mark>	
		egistered agent, or both, in the State of Florid	da.
1. The name of t	he corporation: San Jose Professiona	Park Condominiums Association, Inc.	
	office address: 12078 San Jose Blvd		
3. The mailing a	ddress (if different):		
4. Date of incorporation/qualification: 11/22/2011 Document number: N110000			3
	street address of the current register tment of State: (If resigned, enter res	red agent and registered office on file with th signed)	ie
	Resigned		
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or registered office	
	Jason S. Allen		2825
	12078 San Jose Blvd, Suite 3		
	P.o	O. Box NOT acceptable	(
	Jacksonville, FL 32223		-0 ·
The street addre as changed will	ss of its registered office and the st be identical.	reet address of the business office of its reg	gistered agent.
Such change wa authorized by th	s authorized by resolution duly add e board, or the corporation has bee	opted by its board of directors or by an office in notified in writing of the change.	cer so.P
/\ <u>\U</u> _/	e of an officer of director	Neil K. Stevenson, President Printed or typed name and title	
I hereby accept I further agree t	the appointment as registered ager o comply with the provisions of all	••	e performance ent. Or, if this onfirm that the
	le l	04/29/2024	
Sign	Ature of Registered Agent	Date	-
If signing on bel	nalf of an entity:		
т,	ped or Printed Name		

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