N11000011508

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C. LEWIS JUL 21 2014 EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: North River Seven Association, Inc.

Name of Corporation

DOCUMENT NUMBER:

N11000011508

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:

Jane Cornett, Esq.

Name of Contact Person

Becker & Poliakoff, P.A.

Firm/Company

401 S.E. Osceola Street, Suite 101

Address

Stuart, FL 34994

City/State and Zip Code

JCornett@BPLegal.com

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

For further information concerning this matter, please call:

Jane Cornett, Esq.

,,772 \286-299

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 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	orida
1. The name of the corporation: North River Seven Association, Inc.	
2. The principal office address: 974 N.W. Spruce Ridge Drive Stuart, FL 34994	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 12/13/2011 Document number: N11000	0011508
5. The name and street address of the current registered agent and registered office on file with Florida Department of State: (If resigned, enter resigned)	n the
Robert G. Rydzewski	
Becker & Poliakoff, P.A.	
401 S.E. Osceola Street, Suite 101, Stuart, FL 34994	14 14
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):	Wision de co
Jane Cornett, Esq.	(,,
Becker & Poliakoff, P.A.	OF STAFE
P.O. Box NOT acceptable 401 S.E. Osceola Street, Suite 101, Stuart, FL 34994	3 OHS OHS
The street address of its registered office and the street address of the business office of its as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an of authorized by the board, or the corporation has been notified in writing of the change.	fficer so
Bobis Signature of an officer or director Robis Signature of an officer or director Robis Signature of an officer or director	P-TRESURER
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 comp performance of my duties, and I am familiar with and accept the obligation of my position agent. Or, if this document is being filed merely to reflect a change in the registered office hereby confirm that the corporation has been notified in writing of this change. Signature of Registered Agent	vlete as registered address, I
If signing on behalf of an entity:	
Jane L. Comett Typed or Printed Name	

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