

N13 000004027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

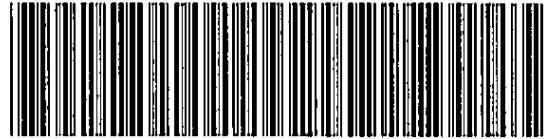
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100352227841

09/21/20--01028--028 **35.00

FILED

2020 SEP 21 PM 1:37

SECRETARY OF STATE
TALLAHASSEE, FL

for 10/26/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESERVE AT SAWGRASS HOMEOWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N13000004027

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:

Keith D. Skorewicz

Name of Contact Person

Appleton Reiss, PLLC

Firm/Company

501 E. Kennedy Blvd., Suite 802

Address

Tampa, FL 33602

City/State and Zip Code

kskorewicz@appletonreiss.com

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

For further information concerning this matter, please call:

Keith D. Skorewicz

Name of Contact Person

at (813)

542-8888

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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: RESERVE AT SAWGRASS HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: c/o FirstService Residential
2300 Maitland Center Parkway, Suite 101, Maitland, FL 32751
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/26/2013 Document number: N13000004027
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)

Michael Gelfand

1555 Palm Beach Lakes BLVD, Suite 1220

West Palm Beach, FL 33401

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Appleton Reiss, PLLC

501 E. Kennedy Blvd., Suite 802

P.O. Box NOT acceptable

Tampa, FL 33602

FILED
2020 SEP 21 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Matt Young

Signature of an officer or director

Matthew Young

Printed or typed name and title

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 complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document 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.

Keith D. Skorewicz

Signature of Registered Agent

9/15/2020

Date

If signing on behalf of an entity:

Keith D. Skorewicz

Typed or Printed Name

*** * * 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 (04/13)