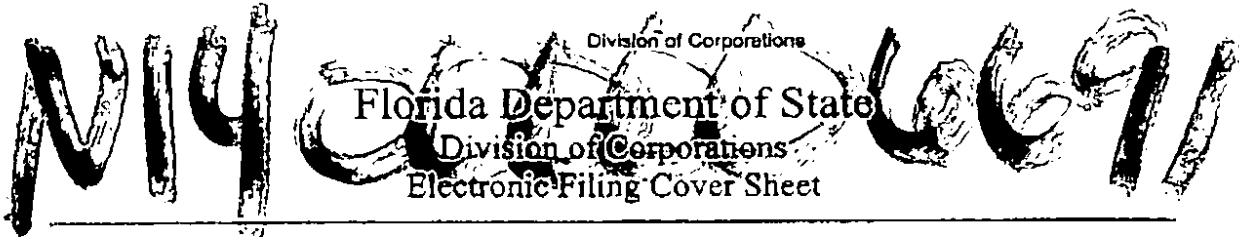


8/27/2018



**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : DELOACH, HOFSTRA & CAVONIS, P.A.  
Account Number : I19990000123  
Phone : (727)397-5571  
Fax Number : (727)393-5418

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address:

Karen@dhlaw.com

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

18 AUG 30 AM 9:45

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18 AUG 30 PM 3:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE  
BAY BREEZE OF PINELLAS COUNTY CONDOMINIUM  
ASSOCIATIO**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

AUG 31 2018  
S. YOUNG

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H18000250682

# 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: Bay Breeze of Pinellas County Condominium Association, Inc.
2. The principal office address: 601 12th Avenue NE #4  
St. Petersburg, FL 33701
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 7/16/2014 Document number: N14000006691
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)  
Peter T. Hofstra  
8640 Seminole Boulevard  
Seminole, FL 33772

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

DeLoach, Hofstra & Cavanis, P.A.

8640 Seminole Boulevard

P.O. Box NOT acceptable

Seminole, FL 33772


SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

18 AUG 30 AM 9:45

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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.

  
Signature of an officer or director

John Fletcher

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.

  
Signature of Registered Agent

8/27/18

Date

If signing on behalf of an entity:

Dennis R. DeLoach, Jr., President

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 (03/12)

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