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COVER LETTER

Division of Corporations					
THE TIDES II CONDOMINIUM AT SWEETWATER BY DEL WEBB A	ASSOCIATION, INC.				
Name of Corporation					
DOCUMENT NUMBER: N14000009817					
The enclosed Statement of Change of Registered Office/Agent and	fee are submitted for filing.				
Please return all correspondence concerning this matter to the follo					
Karen Wonsetler, Esq.					
Name of Contact Person					
Karen Wonsetler, P.A.					
Firm/Company					
860 N. Orange Avenue,	Suite 135				
Address					
Orlando, FL 32801					
City/State and Zip Code	-				
office@kwpalaw.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Karen Wonsetler 40	770-0846 a Code & Daytime Telephone Number				
Name of Contact Person Area	a Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of Sta	ate.				
Mailing Address: Amendment Section	Street Address:				
_ :::::::::::::::::::::::::::::::::::::	Amendment Section Division of Corporations				
•	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				

CR2E045 (03/12)

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

	provisions of sections 607.0502, 617.0502, 607.1508, ange is submitted for a corporation organized under th			, this	_
•	er to change its registered office or registered agent, o			<u></u>	_
1. The name of	the corporation: THE TIDES II CONDOMINIUM AT SWEE	ETWATER BY DEL WEB	B ASS	DCIATI	ON, INC
2. The principal	office address: 6620 SOUTHPOINT DRIVE SOUTH	SUITE 610, JACKSON	IVILLE	, FL 32	216
z. tile printerpa					
3. The mailing	address (if different):				
4. Date of incom	rporation/qualification: 10/23/2014 Docum	nent number: N1400	00009	817	
	nd street address of the current registered agent and registered of State: (If resigned, enter resigned)	istered office on file w	ith the		
	WASSERSTEIN PA				
	6501 Congress Avenue, Suite 100				
	Boca Raton, FL 33487				v='s
6. The name ar (if changed):	nd street address of the new registered agent (if change	d) and /or registered of	fice	TEN JUL 24	Neisivi Herita
	KAREN WONSETLER, ESQ.		_	24	'
	860 N. ORANGE AVENUE, SUITE 1	35	,		- 3時間 - 5世
	P.O. Box NOT scceptable		•	<u>ş</u> . 2	1
	ORLANDO, FL 32801			8	1
The street add as changed wi	ress of its registered office and the street address of the identical.	he business office of it	ts regist	tered a	gent,
Such change vauthorized by	was authorized by resolution duly adopted by its board the board, or the corporation has been notified in writing a 1 a	d of directors or by an ting of the change.	officer	s o	
They	Illure of apporting or director	Agel AlForgo Printed or typed name and ti	PRes	اطعي	
I hereby accept further agree performance of agent. Or, if the hereby confined to the confined	of the appointment as registered agent and agree to a e to comply with the provisions of all statutes relative of my duties, and I am familiar with and accept the ol his document is being filed merely to reflect a chang n that the corporation has been notified in writing of	ct in this capacity, to the proper and cor bligation of my positio e in the registered offi this change.	nplete n as re ce addi	gistere ress, I	d
1		7-7-15			
Š	ignisture of Registered Agent	Date			_
If signing on b	pehalf of an entity:				
Karen Wo	onsetler, Esq.				
	Typed or Printed Name				

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