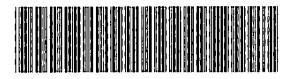
N14069

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	

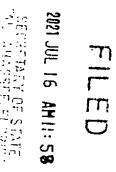
Office Use Only



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RA & RO charge

07/16/21--01008--007 **35.00



AUG 0 3 2021 A RAMSEY

COVER LETTER

TO:

Amendment Section

Name of Contact Person	at (321)639-3360 Area Code & Daytime Telephone Numbe
Laurajo Morris	
For further information concerning this matter, please	e call:
E-mail address: (to be used for future annual repo	ort notification)
info@sunriselandingcondo.com	
City/State and Zip Code	
Cocoa FL 32927	
Address	
7350 N Highway 1 Unit 105	
Firm/Company	
Sunrise Landing Condominium Association of Brevard Inc	:
Name of Contact Person	
Laurajo Morris	
Please return all correspondence concerning this matter	er to the following:
The enclosed Statement of Change of Registered Offi	ce/Agent and fee are submitted for filing.
DOCUMENT NUMBER: N14069	
Name of Corporation	
SUBJECT: Sunrise Landing Condominium Association of	of Brevard Inc

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

Amendment Section
Division of Corporations
The Centre of Tallahassee

Street Address:

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

7 -

statement of c	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this shange is submitted for a corporation organized under the laws of the State of Florida	
•	der to change its registered office or registered agent, or both, in the State of Florida.	
	of the corporation: Sunrise Landing Condominium Association of Brevard County Inc	
2. The princip.	pal office address: 7350 N Highway 1 Unit 105	-
3. The mailing	g address (if different):	
4. Date of inco	prporation/qualification: 03/27/1986 Document number: N14069	-
5. The name as Florida Depart	nd street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	2
	Soileau, John, Esq.	
	Watson, Soileau, DeLeo, & Burgett PA	
	3490 N US Highway 1 Suite 103, Cocoa FL 32926	= 0
6. The name an (if changed):	and street address of the new registered agent (if changed) and /or registered office	FILED 38
	Seth D. Chipman, Esq.	
	Seth D. Chipman PA	
	P.O. Box NOT acceptable	
	96 Willard St Suite 204, Cocoa FL 32922	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Mily	Kathy Elliott, President	
hereby accept		
further agree to finy duties, and duties, and document is being to the corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this inglied merely to reflect a change in the registered office address, I hereby confirm that the steen notified in writing of this change.	
	(12/2)	
Sign	mature of Registered Agent Date	
f signing on bel	half of an entity:	
era 1).	Ch. Pincin, #50	

* * * 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)