

N15000 006 029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

11/25/18--010038--011 ♦♦35.00

Special Instructions to Filing Officer:

FIGURE 1. STATE
REGULATIONS
1970-75 AND 1985

Office Use Only

RA Change

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Oak View Village Homeowners Association Inc
Name of Corporation

DOCUMENT NUMBER: N15000005929

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:

Dawn Johnson, CAM

Name of Contact Person

First Choice Realty of North Florida LLC

Firm/Company

825 NW 13th St

Address

Gainesville, FL 32601

City/State and Zip Code

djohnsonrealty@aol.com

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

For further information concerning this matter, please call:

Dawn Johnson, CAM

352 514-9508

Name of Contact Person

Area Code & Daytime Telephone Number

ED. OF STATE CHARTER

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 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: Oak View Village Homeowners Association Inc
2. The principal office address: 825 NW 13th St, Gainesville, FL 32601
3. The mailing address (if different): same as above
4. Date of incorporation/qualification: 6/12/2015 Document number: N15000005929
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)
resigned

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Dawn Johnson, CAM
825 NW 13th St
P.O. Box NOT acceptable
Gainesville, FL 32601

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

dataloop verified
11/19/19 7:54 AM EST
ZMXN AN9x-EG11KDHY

Jon Clayton, Director, Sec., Treas.
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

11/18/19

Date

If signing on behalf of an entity:

Dawn Johnson, CAM
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