N15000006440

(Requestor's Name)					
(Address)					
(Address)					
(0) 10 10 10 10					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
08/14/23					

Office Use Only

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S. CHATHAM

AUG 2 5 2023

2021.03 19 VIII: 18



July 17, 2023

PAMELA PÉTERSON, LCAM 5415 JAEGER RD B NAPLES, FL 34109 US

SUBJECT: LIVINGSTON LAKES CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N15000006440

We have received your document for and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

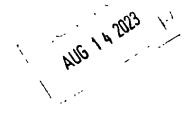
The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

The registered agent must sign accepting the designation.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham Regulatory Specialist III Director's Office

Letter Number: 523A00015839



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

statement of cha	inge is submitted for a corporation	517.0502, 607.1508 , or 617.1508 , Florida S in organized under the laws of the State of $\frac{F}{2}$ is registered agent, or both, in the State of Fi	LORIE)A	
		KES CONDOMINIUM ASSOCIATION, IN			
	office address: 5415 Jaeger Rd B, I				
3. The mailing a	ddress (if different):			 	
4. Date of incorp	poration/qualification: 2015	Document number:			
5. The name and		stered agent and registered office on file wit			
	RESIGNED -	·			
	PARAMOUNT PROPERTY MAN	NAGEMENT, LLC	<i>:</i> -	20	
	5629 STRAND BLVD - STE. 412	NAPLES, FL 34110 US		2023 AUS I	. ;
6. The name and (if changed):	street address of the new register	ed agent (if changed) and /or registered offi	ce		-
	SPIRES & ASSOCIATES, P.A	•		<u> </u>	ا، ب انعند
	5415 Jaeger Rd B		1	: 8	
	Naples, FL 34109	P.O. Box NOT acceptable			
The street addre	ss of its registered office and the be identical.	street address of the business office of its	regist	ered ag	ent,
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	dopted by its board of directors or by an cen notified in writing of the change.	fficer	so	
Koleni	. Peck	ROLENE PECK, PRESIDENT			
_	e of an officer or director	Printed or typed name and titli	-	-	_
of my duties, and docyment is bei	the appointment as registered ago comply with the provisions of a lam familiar with and accept to gilled merely to reflect a chang been notified in writing of this c	ent and agree to act in this capacity, all statutes relative to the proper and comp he obligation of my position as registered e in the registered office address, I hereby hange.	olete p agent confi	erforma Or if rın that	ince this the
Jugan (ature of Kegisiered Agent	04/11/2023			
If signing on bel	5	Dut			
LIVINGSTON L	AKES CONDO ASSN, INC				
	ped or Printed Name				

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