N15000007768

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	





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2024 OCT -7 MH 3: 45



Mary R. Hawk Shareholder

Phone: 941.957.2994 Fax: 941.907.0080

mhawk@beckerlawyers.com

Becker & Poliakoff 1001 3rd Avenue West Suite 300 Bradenton, FL 34205



September 23, 2024

Via FedEx: 279825068700

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Savanna at Lakewood Ranch Homeowners' Association, Inc.

Document Number - N15000007768

Dear Sir/Madam:

Enclosed please find the Statement of Change of Registered Agent form along with Check #50107 in the amount of \$35.00 made payable to the Department of State to cover the cost of filing.

Should you have any questions, please do not hesitate to contact me. Thank you.

Sincerely,

Mary R. Hawk For the Firm

MRH1/mm Enclosure

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

statement of ch	ange is submitted for a corporation of	7.0302, 607.1308, or 617.1308, Florida Statut organized under the laws of the State of <mark>Florid</mark> registered agent, or both, in the State of Florid	a	
1. The name of	the corporation: Savanna at Lakewoo	od Ranch Homeowners' Association, Inc.		
2. The principa	l office address: c/o Advanced Manage	ement of SW FLA		
	iter Pkwy, Bradenton, FL 34202			
3. The mailing	address (if different):			
4. Date of inco	rporation/qualification: 08.10.2015	Document number: N15000007768	<u> </u>	
5. The name an Florida Depa	nd street address of the current registe artment of State: (If resigned, enter re	ered agent and registered office on file with the signed)	2	
	The Law Offices of Lobeck and Han	son, P.A.		
	2033 Main Street. Suite 403		2024	
	Sarasota, Fl. 34237		* : 2024 OCT -7	
6. The name ar (if changed):		d agent (if changed) and /or registered office	-7 MH 3:45	
	Becker & Poliakoff, P.A		ယ္ န	
	12140 Carissa Commerce Court, Suite 200			
	Fort Myers, FL 33966	O. Box NOT acceptable		
	ress of its registered office and the s Il be identical.	street address of the business office of its reg lopted by its board of directors or by an office en notified in writing of the change.		
authorized by	the board, or the corporation has be	en notified in writing of the change. 7/28/2024		
Sima	hire of an officer or director	Printed or typed name and title		
I hereby accep I further agree of my duties, a document is bo		ent and agree to act in this capacity. Il statutes relative to the proper and complete e obligation of my position as registered ago in the registered office address. I hereby co	e performance ont. Or, if this nfirm that the	
-/	MINCH	6.20.2024		
Si	gnature of Registered Agent	Date		
If signing on b	ehalf of an entity:			
Mary Hawk, Es	eq			
	Typed or Printed Name			
	* * * FILIN	G 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)