

N 1600000 56 97

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

pd \$25.00
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\$15.00

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06/09/17--01011--015 **75.00

07/14/17--01002--003 **10.00

S. TALLENT

JUL 17 2017

R/A-CH

FILED
17 JUL 10 AM 8:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 20, 2017

ROBERT J CONNOR
OAK LANE FARMS PROPERTY OWNER'S ASSOCIAT
19379 SE HIDDEN BRIDGE COURT
JUPITER, FL 33458

SUBJECT: OAK LANE FARMS PROPERTY OWNERS' ASSOCIATION, INC.
Ref. Number: N16000005697

We have received your document for OAK LANE FARMS PROPERTY OWNERS' ASSOCIATION, INC. and your check(s) totaling \$75.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 117A00012496

RECEIVED
17 JUL 10 PM 4:44
001



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 6, 2017

ROBERT J CONNOR
OAK LANE FARMS PROPERTY OWNER'S ASSOCIAT
19379 SE HIDDEN BRIDGE COURT
JUPITER, FL 33458

SUBJECT: OAK LANE FARMS PROPERTY OWNERS' ASSOCIATION, INC.
Ref. Number: N16000005697

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Susan Tallent
Regulatory Specialist II

Letter Number: 117A00012496

2nd attempt

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Oak Lane Farms Property Owner's Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N16000005697

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:

Robert Connor
Name of Contact Person

Oak Lane Farms Property Owner's Assoc.
Firm/Company

19379 SE Hidden Bridge Court.
Address

Jupiter FL 33458
City/State and Zip Code

rcconnor@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Connor at (561) 379-8008
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State. - *already paid see letter.*

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 Lane Farms Property Owner's Association Inc.
2. The principal office address: 19379 SE Hidden Bridge Court
Jupiter FL 33458
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 6/6/2016 Document number: N16000005697

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)

2237 Monet Road
N. Palm Beach FL 33410

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

19379 SE Hidden Bridge Court
Jupiter FL 33458

P.O. Box NOT acceptable

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.

Robert J Connor
Signature of an officer or director

ROBERT J CONNOR PRESIDENT
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.

Robert J Connor
Signature of Registered Agent

JULY 4, 2017
Date

If signing on behalf of an entity:

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
CR2E045 (03/12)

FILED
17 JUL 10 AM 8:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA