

N16000009114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

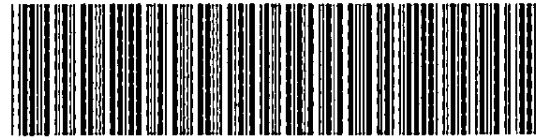
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

JQ 10/2/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: S.W. 37TH BLVD. STORMWATER BASIN MANAGEMENT ASSOCIATION, IF
Name of Corporation

DOCUMENT NUMBER: N1600009114

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:

Sergio Reyes
Name of Contact Person
S.W. 37TH BLVD. STORMWATER BASIN MANAGEMENT ASSO
Firm/Company
720 SW 2nd Avenue, South Tower, Suite 300
Address
Gainesville, FL 32601
City/State and Zip Code
sreyes@edaf.com

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

For further information concerning this matter, please call:

Sergio Reyes at (352) 373-3541
Name of Contact Person Area Code & Daytime Telephone Number

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT
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: S.W. 37TH BLVD. STORMWATER BASIN MANAGEMENT ASSOCIATION, I

2. The principal office address: 720 SW 2nd Avenue, South Tower, Suite 300
Gainesville, FL 32601

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 9/14/2016 Document number: _____

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)

James D. Henderson II
3501 S. Main Street, Suite 1
Gainesville, FL 32601

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

Sergio Reyes
720 SW 2nd Avenue, South Tower Suite 300
P.O. Box NOT acceptable
Gainesville, FL 32601

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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.

Sergio Reyes
Signature of an officer or director

Sergio Reyes, Director
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 of my duties, and I am familiar with and accept the obligation of my position as registered agent. This document is being filed merely to reflect a change in the registered office address. I hereby certify that the corporation has been notified in writing of this change.

Sergio Reyes
Signature of Registered Agent

8/13/2020
Date

If signing on behalf of an entity:

Sergio Reyes
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 32317
CR2E045 (04/13)