

N16 000009114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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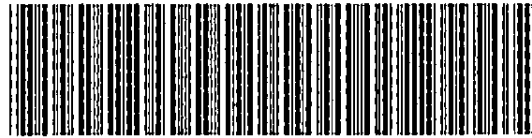
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
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:** N16000009114

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@edafl.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

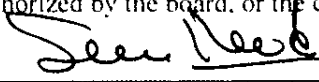
720 SW 2nd Avenue, South Tower Suite 300

P.O. Box NOT acceptable

Gainesville, FL 32601

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

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.*

  
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 32317-6327  
CR2E045 (04/13)

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TALLAHASSEE, FL