N17000007751

(Re	equestor's Name)			
(Ad	ddress)	<u></u>		
(Ad	ddress)			
(Ci	ity/State/Zip/Phone #	n		
PICK-UP	WAIT	MAIL		
(B	usiness Entity Name)		
(Document Number)				
Certified Copies	Certificates o	of Status		
Special Instructions to Filing Officer:				

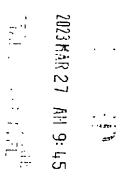
Office Use Only

1109-547.



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11/21/23--01035--016 **35.00



Of 413/2023

COVER LETTER

Amendment Section

TO:

SUBJECT: Bridgewater Landings Homeowners Assoc Inc Name of Corporation	<u> </u>
·	
DOCUMENT NUMBER: N17000007751	
The enclosed Statement of Change of Registered Office/Agent and fee are subn	nitted for filing.
Please return all correspondence concerning this matter to the following:	
Diane Lee	
Name of Contact Person	
DLG Management Services	
Firm/Company	
406 N Hubert Avenue Suite 102	
Address	
Tampa, FL 33609	
City/State and Zip Code	
dlee@dlgmgmt.com	
E-mail address: (to be used for future annual report notification)	
,	

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

Name of Contact Person

Amendment Section
Division of Corporations
The Centre of Tallahassee

at (813)254-1600 Area Code & Daytime Telephone Number

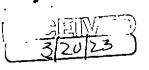
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

Diane Lee







FLORIDA DEPARTMENT OF STATE Division of Corporations

February 15, 2023

DIANE LEE 406 N HUMBERT AVENUE SUITE 102 TAMPA, FL 33609

SUBJECT: BRIDGEWATER LANDING HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N17000007751

We have received your document for BRIDGEWATER LANDING HOMEOWNERS ASSOCIATION. INC. 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 accordingly.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 123A00003728



MAR 2 7 2023

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

statement of ch	ange is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida $\mathfrak S$ ganized under the laws of the State of $\mathfrak S$ gistered agent, or both, in the State of $\mathfrak F$	ilorida
1. The name of	the corporation: Bridgwater Landing 1	Iomeowners Association Inc	
		Suite 102 Tampa, FL 33609	
	Name Same		
5. The mailing	address (if different):	Document number: N1700000	 07751
	artment of State: (If resigned, enter res	ed agent and registered office on file wi igned)	in the
	Gail Popovich		21
			2023 HAR
			5
	Valrico, FL 33596		- 27
6. The name ar (if changed)	nd street address of the new registered:	agent (if changed) and /or registered off	fice At 9:
	DLG Management Services, Inc.		5
	406 N Hubert Avenue, Suite 102		
	P.C Tampa, FL 33609). Box NOT acceptable	-
The street add as changed wi	ress of its registered office and the str ll be identical.	reet address of the business office of it	s registered agent,
Such change v authorized by	vas authorized by resolution duly ado the board, or the corporation has been	pted by its board of directors or by an notified in writing of the change.	officer so
Lary ;	Lint	LARRY LINT PA	RESIDENT
I hereby accept I further avre	ture of an officer or director of the appointment as registered agen to comply with the provisions of all ind I am Jamiliar with and accept the eing filed merely to reflect a change i as been notified in writing of this char	Printed or typed name and it t and agree to act in this capacity, statutes relative to the proper and con obligation of my position as registered in the registered office address, I herely nge.	unlese verformance
If signing on b	echalf of an entity:	Date	
Dian	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 (04/13)