Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000328766 3)))



H210003287663ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

21 SEP -3 ANTI: 03

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (514)280-3338

Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:		
-------	----------	--	--

REGISTERED AGENT CHANGE VILLAGE GREEN OF WELLINGTON PROPERTY OWNERS ASSOCIAT

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

SEP 0 7 2021

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

By:

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

statement of cha	nge is submitted for a corporation organ	12, 607.1508, or 617.1508, Florida Stanues nized under the laws of the State of <mark>FL</mark> ered agent, or both, in the State of Florida.		_
	ne corporation;	LINGTON PROPERTY OWNERS ASSOCIATION	ON, INC	<u>. </u>
2. The principal	office address: 2600 CITADEL PLAZA E	PR. SUITE 125 HOUSTON, TX 77008		_
	ddress (if different):			_
4. Date of incorp	poration/qualification: 09/28/2018	Document number: N18000010500		
	street address of the current registered a timent of State: (If resigned, enter resigned	gent and registered office on file with the ed)		
	CAPITOL CORPORATE SERVICES IN	C		
	515 EAST PARK AVE, 2ND FLOOR			
	TALLAHASSEE, FL 32301	_	∑ 'c	20
6. The name and street address of the new register (if changed):		nt (if changed) and /or registered office	LENGUE OF	2021 SEP -
	C T Corporation System		## [] c	<u> </u>
	1200 South Pine Island Road		FE (8 전
	P.O. Box Plantation, Florida 33324	NOT acceptable	RIDA	5.45
The street address changed will	ss of its registered office and the street be identical.	address of the business office of its regist	ered age	nt,
Such change wa authorized by th	s authorized by resolution duly adopted e board, or the corporation has been no	by its board of directors or by an officer tiffed in writing of the change.	so	
/s/ Harvey G		Harvey G. Weinreb, Vice President		
-	e of an officer or director	Printed or typed name and title		_
I further agree t	the appointment as registered agent and comply with the provisions of all state of land accept the obling filed merely to reflect a change in the been notified in writing of this change.	d agree to act in this capacity, ites relative to the proper and complete po gation of my position as registered agent e registered office address, I hereby confi	erformar . Or, if ti rm thát t	ice his he
CH	1 ym	8/5/2021		
Sigi	minipol Pegisteral Agent	Date		-
_	red Younan			
ASSIŞ	tant Secretary			

* * * FILING FEE: \$35.00 * * *