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.

(((H20000253898 3)))



H200002538983ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053

Phone : (561)694-8107 Fax Number : (561)694-1639

**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 CHAMPIONSGATE CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

S. YOUNG

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

statement of change is:	ons of sections 607.0502, 617.050. Submitted for a corporation organ	ized under the law	vs of the State of Florida	
	ange its registered office or registe			.
1. The name of the corp	oration: CHAMPIONSGATE CO.	IDOMINIUM AS	SOCIATION, INC.	
2. The principal office	address: 6750 FORUM DR STE 31	0, ORLANDO, F	32821	
3. The mailing address	(if different):			
4. Date of incorporation/qualification: 01/28:2019 Document number: N1900000096			number: N1900000966	
	address of the current registered ag of State: (If resigned, enter resigne	gent and registere		
CT O	ORPORATION SYSTEM			
1200	S PINE ISLAND RD			- .
PLAN	TATION, FL 33324			
6. The name and street (if changed):	address of the new registered agen	t (if changed) arx	1/or registered office	
Согро	rate Creations Network Inc.			•
801 U	S Highway 1			
···	P.O. Box	NOT acceptable		
North	Palm Beach, FL 33408			
The street address of it as changed will be ider	s registered office and the street a	nddress of the bu	siness office of its regis	tered agent,
Such change was authorized by the board	rized by resolution duly adopted 1, 0: the corporation has been not	by its board of diffed in writing o	irectors or by an office f the change.	r so
	<i>₽)</i>	Danielle Gossma	n, Attorney-in-Fact	
I further agree to comp of my duties, and I am document is being filed corporation has been n	pointment as registered agent and ly with the provisions of all statu familiar with and accept the obliging merely to reflect a change in the atified in writing of this change.	l agree to act in t	d or typed name and title his capacity, e proper and complete p tion as registered agen e address, I hereby conf	performance t. Or, if this irm that the
Danielle Gossman, Speci				
Typed or Pr	* * * FILING FE	E: \$35.00 * * *	C	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

page 4