

N1900000 3D10

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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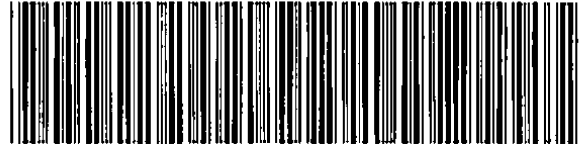
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Good Homes Vista Neighborhood Assoc. Inc

Name of Corporation

DOCUMENT NUMBER: N19000003010

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:

Leah Reissig

Name of Contact Person

Good Homes Vista Neighborhood Assoc. Inc

Firm/Company

1556 Dess Dr

Address

Orlando, FL 32818

City/State and Zip Code

leahmonster1@gmail.com

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

For further information concerning this matter, please call:

Leah Reissig

Name of Contact Person

at ( 407 ) 529-9027

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH 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: Good Homes Vista Neighborhood Association
2. The principal office address: 1556 Good Homes Road
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 03/13/2019 Document number: N19000003010

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)

Libia Gavilanez

8606 Hal Ct

Orlando, FL 32818

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

Michael Spaulding

1550 Dess Drive

P.O. Box NOT acceptable

Orlando, FL 32818

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.

Linda Rogers, Secretary  
Signature of an officer or director

Linda Rogers, Secretary  
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 performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Michael Spaulding  
Signature of Registered Agent

7/13/19  
Date

If signing on behalf of an entity:

Good Homes Vista Neighborhood Assoc, Inc.

Typed or Printed Name

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