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REGISTERED AGENT CHANGE CRYSTAL CREEK OF ORLANDO CONDOMINIUM ASSOCIATION, IN

Certificate of Status	0
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the p	rovisions of sections 607.0502. 617.	0502, 607.1508, or 617.1508, Florida Statutes, this regarded under the laws of the State of Florida	<i>S</i>		
in arder	no change its registered office or re	gistered agent, or ooth, in the didte of 1 to the			
	CRYSTAL CREEK	OF ORLANDO CONDOMINIUM ASSOCIATION, I	NC.		
1. The name of the 2. The principal of	office address: 6750 FORUM DRIVI	E, SUITE 310, ORLANDO, FL 32821			
3. The mailing a	ddress (if different):	N10000005105			
4. Date of incorp	Document number: N19000005495				
5 The name and	street address of the current register truent of State: (If resigned, enter re-	red agent and registered office on file with the			
	C T CORPORATION SYSTEM				
	1200 SOUTH PINE ISLAND ROAL	)	~3		
	PLANTATION, FL 33324		2020		
6. The name and (if changed):	street address of the new registered	l agent (if changed) and for registered office			
	Corporate Creations Network Inc.				
	801 US Highway 1		م: ا <sup>:</sup> ب		
	P.O. Box NOT acceptable				
	North Palm Beach, Florida 33408				
The street addre	ess of its registered office and the s be identical.	treet address of the business office of its registere	d agent		
Such change wa authorized by th	as authorized by resolution duly ad ne board, or the corporation has been	opted by its board of directors or by an officer so an notified in writing of the change.			
		Danielle Gossman, Attorney-in-Fact			
I further agree i of my duties, an document is bei	the appointment as registered age, to comply with the provisions of al d I am familiar with and accept the ng filed merely to reflect a change s been notified in writing of this ch	Printed or typed name and title  nt and agree to act in this capacity. I statutes relative to the proper and complete perf e obligation of my position as registered agent. C in the registered office address, I hereby confirm ange.	formanc Or if thi that the		
		07/30/2020			
Sig	nature of Registered Agent	Date			
If signing on be	half of an entity:				
Danielle Gossma	in, Special Secretary				
T	yped or Printed Name				

\* \* \* FILING FEE; \$35.00 \* \* \*

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