N19000011233

(Re	questor's Name)	
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PICK-UP		MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

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TO: Amendment Section Division of Corporations

SUBJECT: Dos Rios Homeoweners Association. INc. Name of Corporation

DOCUMENT NUMBER: N19000011233

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:

Patricia Mallard
Name of Contact Person
Duval Realty, Inc.
Firm/Company
6196 Lake Gray Boulevard. Suite 103
Address
Jseksonville, FL 32244
City/State and Zip Code
Pat@DuvalRealtyInc.com
E-mail address: (to be used for future annual report notificatio

For further information concerning this matter, please call:

 Pat Mallard
 at (904) 367-1818

 Name of Contact Person
 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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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 $\frac{\mathsf{FL}}{\mathsf{FL}}$ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Dos Rios Homeowners Association, INc.

2. The principal office address: 6196 Lake Gray Boulevard, Suite 103, Jacksonville, FL 32244

3. The mailing address (if different): _

Document number: N19000011233 4. Date of incorporation/qualification: 10/23/2019

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)

Sovereign & Jacobs Property Management Companies

461 A1A Beach Boulevard

St. Augustine, FL 32080

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

Duval Realty, Inc. 6196 Lake Grav Boulevard, Suite 103

P.O. Box MOI acceptable

Jacksonville, FL 32244

The street address of its registered office and the street address of the business office of its registered affent. 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.

of an officer or director

Richard Herrick, President Printed or typed name and title 021 OCT 20 AM 10:

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I hereby accept the appointment as registered agent and agree to act in this capacity. I further upper 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 burgely to reflect a change in the registered office address. Thereby confirm that the dorparation has been notified in writing of this change.

signature of Registerid Agent

Typed or Printed Name

October 14, 2021

Date

If signing on behalf of an entity:

Patricia A. Mallard, Duval Realty, Inc.

* * * 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)