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		Division of Corporations Fax Number : (850)617-6	380	
RECEIVED.	SEC.	(333,433	AGENT SOLUTIONS INC 52 274 274 siness entity to be used for	future

REGISTERED AGENT CHANGE THE WALK AT INDIAN ROCKS BEACH HOMEWONERS ASSOCIATIO

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C. BRUMBLEY

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: THE WALK AT INDIAN ROCKS BE Name of Corporation	EACH HOMEOWNERS ASSOCIATION, INC.		
DOCUMENT NUMBER: N200000026	43		
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this	_		
Mary Castillo			
Name of Contact Person			
Registered Agent Solutions, Inc.			
Firm/Company			
Corporate Center One, 5301 Southwest Pkwy, Ste 40	00		
Address			
Austin, Texas 78735			
City/State and Zip Code			
E-mail address: (to be used for future annual	report notification)		
For further information concerning this matter, p	lease call:		
Mary Castillo	at (888) 7 05-7 27 4		
Name of Contact Person	at (888) 7 05-7 27 4 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the I	Department of State.		
Mailing Address:	Street Address:		
Mailing Address: Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

1. The name of the corporation: THE WALK AT INDIAN ROCKS BEACH HOMEOWNERS ASSOCIATION. INC. 2. The principal office address: 3922 COCONUT PALM DRIVE, SUITE 108 TAMPA, FL 33619 3. The mailing address (if different): 4. Date of incorporation/qualification: 03/06/2020 Document number: N20000002643 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) NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Registered Agent Solutions, Inc. 155 Office Plaza Dr. Suite A PO Box NOT ecceptable Tallahassee FL 32301 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. Jadyn Winght, Assistant Secretary In the registered agent is registered agent and agree to act in this capacity. Jadyn Winght, Assistant Secretary In the registered agent is registered office address, I hereby confirm that the corporation has been notified in writing of the change. Jadyn Winght, Assistant Secretary The registered agent of the proper and complete performance of my duties, and I gin familiar with and accept the obligation of my position as registered agent. Or if this document is being filed merely to reflect a phange in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. Determine the proper and complete performance of my duties, and I gin familiar with and accept the obligation of my position as registered agent. Or if this document is being filed merely to reflect a phange in the registered office address, I hereby confirm that the corporation has be	statement of ch	provisions of sections 607.0502, to ange is submitted for a corporation for to change its registered office of	n organized	under the laws of the State of Fl	LORIDA	_
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Mackenzie Hart, Assistant Secretary	Signi If signing on beh			Date		-
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* * * 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)