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(((H21000103615 3)))



H210001036153ABCT

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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)214-8442

**Enter the email address for this business entity to be used for future N annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE STOREY DRIVE COMMUNITY ASSOCIATION, INC.

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

-		517.0502, 607.1508, or 617.1508, Florida Stat.		
=		n organized under the laws of the State of registered agent, or both, in the State of Flor		_
		COMMUNITY ASSOCIATION, INC.		
2. The principal	office address: C/O LENNAR HO	MES, LLC, 2300 MAITLAND CENTER PARI	CWAY,	
	AITLAND, FL 32751			
3 The mailing a	iddress (if different):			_
		Document number: N200000104		
	I street address of the current registiment of State: (If resigned, enter	stered agent and registered office on file with t resigned)	he	
	C T CORPORATION SYSTEM			
	1200 SOUTH PINE ISLAND RO	AD		
	PLANTATION, FL 33324			
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office		
	Corporate Creations Network Inc.		5. 51	3
	801 US Highway 1			- - -
P.O. Box NOT acceptable		P.O. Box NOT acceptable	: :	-
	North Palm Beach, FL 33408		10	
The street addre as changed will	ess of its registered office and the be identical.	e street address of the business office of its re	gistered age	ent. 🦲
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	adopted by its board of directors or by an officeen notified in writing of the change.	icerso Oi	
/s/ Caitlin L	azarus	Caitlin Lazarus, Attorney-in-Fact		
Signatu	re of an officer or director	Printed or typed name and title		
l further agree i of my duties, an document is bei	to comply with the provisions of i	gent and agree to act in this capacity, all statutes relative to the proper and comple the obligation of my position as registered ag se in the registered office address, I hereby c change.	te performa gent. Or, if onfirm that	ince this the
/s/ Caitlin L	azanıs	March 15, 2021		
	nature of Registered Agent	Dute		_
If signing on be	half of an entity:			
Caitlin Lazarus,	Special Secretary			
T	yped or Printed Name	=		

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