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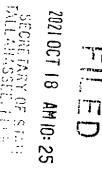
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: PRESERVE AT AVONLEA HOMEOWNERS ASSOCIATION INC.

Name of Corporation

DOCUMENT NUMBER: N20000013103

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:

DANIEL WASSERSTEIN

Name of Contact Person

WASSERSTEIN, P.A.

Firm/Company

301 YAMATO ROAD, SUITE 2199

Address

BOCA RATON, FL 33431

City/State and Zip Code

danw@wassersteinpa.com

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

For further information concerning this matter, please call:

DANIEL WASSERSTEIN

,,561 \288-3999

Name of Contact Person

Area Code & Daytinie 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of <mark>FLORIDA</mark> or to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: PRESERVE AT AVONLEA HOMEOWNERS ASSOCIATION INC.		
2. The principal office address: C/O K. HOVNANIAN PRESERVE AT AVONLEA, LLC,		
3601 QU	ANTUM BLVD., UNIT 102, BOYNTON BEACH, FL 33426	
3. The mailing a	address (if different): N/A	
4. Date of incorp	poration/qualification: 11/19/2020 Document number: N20000013103	
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)		
	CARA CHIEFFALLO, ESQ.	
	3601 QUANTUM BLVD., UNIT 102	
	BOYNTON BEACH, FL 33426	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	WASSERSTEIN, P.A.	
	301 YAMATO ROAD, SUITE 2199	
	P.O. Box NOT acceptable BOCA RATON, FL 33431	
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.		
Signato	CRIMA PICKARD ST CKETTICH TIKEASTERS Frinted 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.		
_ LIW	10/13/21	
If signing on he	half of an entity:	
If signing on behalf of an entity: DANIEL WASSERSTEIN		
Typed or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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