N20787

		
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COVER LETTER

TO: Amendment Section Division of Corporations Remington Green Property Owners Association, Inc. Name of Corporation N20787 DOCUMENT NUMBER: 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: Mary Katharine Lawler Name of Contact Person Firm/Company 2814 Remington Green Circle Tallahassee, FL 32308 City/State and Zip Code maryklawler@dougcroleyins.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mary Katharine Lawler Name of Contact Person 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 che	inge is submitted for a corporation or	0502, 607,1508, or 617,1508, Florida Statutes, this ganized under the laws of the State of Florida gistered agent, or both, in the State of Florida.	
1. The name of	the corporation: Remington Gre	en Property Owners Association, Inc. n Green Circle, Tallahassee, FL 32308	
	address (if different):		
4. Date of incor	poration/qualification: Effec: 01/1	5/19 Document number: N20787	
	d street address of the current register rtment of State: (If resigned, enter resi	ed agent and registered office on file with the igned)	
	Douglas M. Croley (resigned)		
	2814 Remington Green Circle		
	Tallahassee, FL 32308	rcle	
6. The name and (if changed):	d street address of the new registered a	agent (if changed) and /or registered office.	
	Mary Katharine Lawler		
	2814 Remington Green Ci		
	Tallahassee, FL 32308	NOT acceptable	
The street address changed will	ess of its registered office and the str be identical.	eet address of the business office of its registered agent.	
Such change wa authorized by the	as authorized by resolution duly adop he board, or the corporation has been	oted by its board of directors or by an officer so notified in writing of the change.	
M. Signing	e of afformer or director	Mary Katharine Lawler, Sec/Treas Printed or typed name and title	
I further agree performance of avent. Or, if th	'my duities, and I am familiar with ar	staintes relative to the proper and complete nd accept the obligation of my position as registered reflect a change in the registered office address, I	
////\	Kaul	01/25/2019	
\mathcal{O}	hature of Registered Agent	Date	
If signing on bo	shalf of an entity:		
	arine Lawler		
	'yped 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 * * *