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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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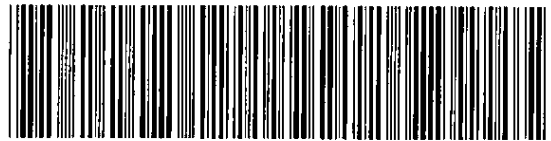
(Business Entity Name)

(Document Number)

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R. MONT

08/16/24

Wonsetler & Webner, P.A.

717 North Magnolia Avenue
Orlando, Florida 32803

Office 407-770-0846

Facsimile 407-770-0843

Email: office@kwpalaw.com

August 13, 2024

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: **Request to Change Registered Agent for
LAUREL POINTE COMMUNITY HOMEOWNERS
ASSOCIATION, INC.**
Document Number N21000011444
FEIN # 92-0569066

Dear Sir or Madam,

Please find enclosed a \$35.00 check to cover the charge for the Association's filing fee for a change of registered agent.

Should you need anything further in this matter, please do not hesitate to contact me directly.

Sincerely,

/s/ Karen J. Wonsetler
Karen J. Wonsetler, Esq.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LAUREL POINTE COMMUNITY HOMEOWNERS ASSOCIATION
Name of Corporation

DOCUMENT NUMBER: N21000011444

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:

Karen Wonsetler

Name of Contact Person

Wonsetler & Webner, P.A.

Firm/Company

717 N. Magnolia Avenue

Address

Orlando/ FL, 32803

City/State and Zip Code

office@kwpalaw.com

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

For further information concerning this matter, please call:

Karen Wonsetler

Name of Contact Person

at (407)

770-0846

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

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LAUREL POINTE COMMUNITY HOMEOWNERS ASSOCIATION
2. The principal office address: C/O FirstService Residential, 2300 Maitland Center Parkway, Suite 101, ORLANDO, FL 32751
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/24/2021 Document number: N21000011444
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)

Martell and Ozim, P.A., 37 N. Orange Avenue, Suite 500, Orlando, FL 32801

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

Registered Agent: Wonsetler, Karen

717 N. Magnolia Avenue, Orlando, FL 32803

P.O. Box NOT acceptable

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.

Ben Imfeld

Signature of an officer or director

Ben Imfeld

Printed or typed name and title

Board Member

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.



Signature of Registered Agent

August 6, 2024

Date

If signing on behalf of an entity:

Typed or Printed Name

***** 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)