## N23000011967

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

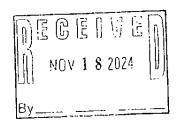
Office Use Only



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12/19/24

November 8, 2024

Charlotte Garner 2700 HIGHWAY 2800 STE 425 W BIRMINGHAM, AL 35223

SUBJECT: MARLIN PLACE AT AVALON HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N23000011967

We have received your document for MARLIN PLACE AT AVALON HOMEOWNERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SHANTELL BROWN Regulatory Specialist II

Letter Number: 724A00024570

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

Marlin Place at Avalon Hannenways Association Inc			
SUBJECT: Marlin Place at Avalon Homeowners Asse Name of Corporation	ociation, inc		
DOCUMENT NUMBER: N23000011967			
The enclosed Statement of Change of Registered O	ffice/Agent and fee are submitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Charlotte Garner			
Name of Contact Person			
Neighborhood Management, LLC			
Firm/Company			
2700 Highway 280, Ste 425W			
Address	<del></del>		
Birmingham, AL 35223			
City/State and Zip Code			
kati@nhmllc.org			
E-mail address: (to be used for future annual re	port notification)		
For further information concerning this matter, please call:			
Charlotte Garner	205 \ 877-9480 ext 721		
Name of Contact Person	at ( 205 ) 877-9480 ext 721 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 cheek made payable to the Department of State.			
Mailing Address: Amendment Section	Street Address: Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		
······	Tallahassee, FL 32303		

CR2E045 (04/13)

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

statement of change	visions of sections 607.0502, 627.0502, 60 is submitted for a corporation organized change its registered office or registered	· · · · · · · · · · · · · · · · · · ·	
		· ·	
	1. The name of the corporation' Marlin Place at Avalon Homeowners Association, Inc		
2. The principal offic	ce address: 1 St. Louis Street, Ste 2500, Mobil	le, AL 30002	
3. The mailing addre	ess (if different): 1 st- Louis Street, Ste 2500	J. Mobile. AL 36602	
4. Date of incorporat	tion/qualification: 09/27/2023	Document number: N23000011967	
	eet address of the current registered agent nt of State: (If resigned, enter resigned)	t and registered office on file with the	
_ <u>c</u>	corporation Service Company		
	785 Old St Augustine Road, Ste 300	<del></del>	
_ Ja	icksonville, FL 32258		
6. The name and stre (if changed):	eet address of the new registered agent (if	changed) and /or registered office	
Re	ebecca Miles		
14	785 Old St Augustine Road, Ste 300		
Jac	P.O. Box NO cksonville, FL 32258	T acceptable	
The street address of as changed will be in	f its registered office and the street addr dentical.	ress of the business office of its registered agent,	
Such change was au authorizedoy the bo	thorized by resolution duly adopted by pard, or the corporation has been notified	its board of directors or by an officer so d in writing of the change.	
RUSCELL Signature of a	in officer of thrector	ebecca Miles, President of Marlin Place at Avalon HOA, Inc. Printed or typed name and title	
I hereby accept the c I further agree to co of my duties, and I a document is being fi corporation has bee	appointment as registered agent and ag mply with the provisions ofall statutes im familiar with and accept the obligati led merely to reflect a change in the reg n notified in writing of this change.	ree to act in this capacity. relative to the proper and complete performance on of my position as registered agent. Or, if this gistered office address,! hereby confirm that the	
Rubella	of Registered Agent	9/6/2024 Date	
If signing on behalf	of an entity:		
becca Miles, President of I	Marlin Place at Avalon HOA, Inc.		

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

Make cheeks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (04/13)

Typed or Printed Name