N24781	
(Requestor's Name) (Address) (Address)	000294988700
(City/State/Zip/Phone #)	02/13/1701028010 **35.00
Certified Copies Certificates of Status	2017 FEB 13 PM 2: 06
Office Use Only	FEB 1 5 2017 C LEWVIS

COVER LETTER

TO: Amendment Section **Division of Corporations**

Remington Park Homeowners' Association of Seminole County, Inc. SUBJECT:

Name of Corporation

N24781 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:

Kevin Davis Name of Contact Person **Community Management Specialists** Firm/Company 1942 W. CR 419, Suite 1030 Address Oviedo, FL 32766 City/State and Zip Code kevin@cmsorlando.com

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

For further information concerning this matter, please call:

Kevin Davis

Area Code & Daytime Telephone Number

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

CR2E045 (03/12)

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: Remington Park Homeowners' Association of Seminole County, Inc.
- 2. The principal office address: c/o Community Management Specialists 1942 W. CR 419. Suite 1030. Oviedo. FL 32766

3. The mailing address (if different):____

4. Date of incorporation/gualification: 1/1/2017 Document number: N24781
--

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)

Premier Association Mgmt of CFL

3112 West Lake Mary Boulevard

Lake Mary, FL 32746

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

Community Management Specialists

1942 W. CR 419, Suite 1030

P.O. Box NOT acceptable

Oviedo, FL 32766

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.

spencer smith	Spencer Smith
V Signature of an officer or director	Printed 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 configm that the corporation has been notified in writing of this change.

Signature of Registered Agent

Kevin Davis, LCAM

2017 FEB 1 3 PH 2:

Li de NOISI. L'évelte

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 (03/12)