N24903

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Moon Lake Homeowners Association, Inc.

Name of Corporation

NOCHMENT NUMBER: N24903

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:

Chanille L. Grigsby, Esq.

Name of Contact Person

Grigsby Law, P.A.

Firm/Company

9240 Bonita Beach Rd., Suite 1117

Address

Bonita Springs, FL 34135

City/State and Zip Code

clgrigsby@grigsbylawpa.com

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

For further information concerning this matter, please call:

Chanille L. Grigsby

239 \948-9

Name of Contact Person

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
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of c		17.0302, 607.1308, or 617.1308, Florid organized under the laws of the State registered agent, or both, in the State (of Florida
	pal office address: c/o Resort N	Homeowners Association, Management, 2685 Horses Naples, FL 34104	
3. The mailing	g address (if different):	· · · · · · · · · · · · · · · · · · ·	
4. Date of inc	orporation/qualification: 2/18/19	88 Document number: N24	1903
	and street address of the current regist partment of State: (If resigned, enter re	tered agent and registered office on file esigned)	with the
	Cohen & Grisby Law		
	9110 Strada Place, #62	200	
	Naples, FL 34108		2019 SEC
6. The name a (if changed	and street address of the new registere):	ed agent (if changed) and /or registered	ZOIS JUN 24 SECRE WHA!
	Grigsby Law, P.A.		
	9240 Bonita Beach Rd.	, Suite 1117	- F. S.
		ox NOT acceptable	_ ~ 39
	Bonita Springs, FL 341	35	_
The street add as changed w	lress of its registered office and the sill be identical.	street address of the business office of	fits registered agent,
Such change vauthorized by	was authorized by resolution duly ad the board, or the corporation has been	lopted by its board of directors or by a en notified in writing of the change.	an officer so
_ Oon	na Shanda	Donna Shan Printed or typed name and	ds, President
juriner agre- performance a agent. Or, if i hereby confiri	pt the appointment as registered age to comply with the provisions of all of my duties, and I am familiar with this document is being filed merely to m that the corporation has been noting the state of Beystered Agent behalf of an entity:		omplete ion as registered fice address, I
	·	Gara hu	
JAMA	Y Law, F. A. Chamile L. Typed or Printed Name	CIR GO BY	
	* * * * * * * * * * * * * * * * * * *	/	

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