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COVER LETTER

TO: Amendment Section Division of Corporations Marietta Forrest Homeowners Association, Inc. Name of Corporation 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: James Long Name of Contact Person J&L Management of North FL, Inc. Firm/Company 10592 Balmoral Circle E. Suite # 7 Address Jacksonville, FL 32218 City/State and Zip Code james@jlmgmtnfl.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: James Long 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 cha	inge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of I	Florida		
1. The name of	the corporation: Marietta Forre	est Homeowners Association			
	office address: 4213 County F rg, FL 32068	Road 218			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 07/20/19	Document number: N2843	33		
	I street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on file wesigned)	ith the		
	Awakening Association I	Management, Inc	,		
	4213 County Road 218				
	Middleburg, FL 32068			17	
6. The name and street address of the new registered agent (if changed) and /or registere (if changed): J&L Management of North, FL Inc		ed agent (if changed) and /or registered of	fice 3	17 MAY -3	• • • • • •
		th, FL Inc		35	
	10592 Balmoral Circle E	. Suite # 7	# "	3	
P.O. Box NOT acceptable		ox NOT acceptable		37	
	Jacksonville, FL 32218	, , , , , , , , , , , , , , , , , , ,			
The street address changed will	ess of its registered office and the sbe identical.	street address of the business office of it	s regist	ered a	gent,
Such change wa authorized by th		dopted by its board of directors or by an een notified in writing of the change.	officer	so	
January Signatu	re of an officer of director	Harvey Roof Printed or typed name and tit	le		
I further agree i performance of agent. Or, if th	to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity. ll statutes relative to the proper and con and accept the obligation of my position to reflect a change in the regislered offic ified in writing of this change.	i as reg	istered ess, I	d
		04/26/17			
If a iomiza an 1-a	half of an antity:	Date			
	half of an entity:				
James Long	yned or Printed Name				

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