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(((H240002326013)))



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Division of Corporations

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From:

Account Name : HOLLAND & KNIGHT OF JACKSONVILLE

Account Number : 074323003114 Phone : (904)353-2000 Fax Number : (904)358-1872

\*\*Enter the email address for this business entity to be used for future  $\frac{200}{100}$ annual report mailings. Enter only one email address please. \*\*

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

	er to change its registered office or registi	,	
		Island Condominium No. Two Association.	Inc.
2. The principa	office address: 40306 Fisher Island Drive,	Fisher Island, FL 33109	
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 10/20/1988	Document number: N28948	
5. The name an Florida Depa	d street address of the current registered a runent of State: (If resigned, enter resigned	agent and registered office on file with the	20
	Haber Law, P.A.		erederal 
	251 N.W. 23 Street		1 harr 
	Miami, FL 33127		9 1
6. The name an (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office	() () () ()
	Melissa Turra, Esq., Holland & Knight Li	.р	
	P.O. Boo Jacksonville, FL 32202	x NOT acceptable	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its regi	stered agent,
Such change w	as authorized by resolution duly adopted he board, or the corporation has been no	d by its board of directors or by an office of the change.	er so
مر	re of an officer or director	Printed or typed name and little	'reasure
oj my autes, ai lociment is bei	the appointment as registered agent an to comply with the provisions of all state of I am famillar with and accept the obli- ng filed merely to reflect a change in th s oven notified in writing of this change.	el agree to act in this capacity, utes relative to the proper and complete igation of my position as registered ager e registered office address. I hereby con	porformance nt. Or, if this firm that the
Mar		07/02/2024	
Sig	miture of Registered Agent	Date	
f signing on be	chalf of an entity:		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)