

N30884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

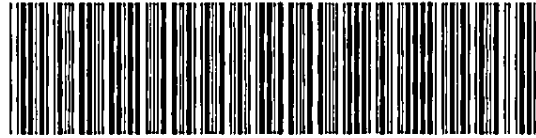
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

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TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lakefield North at Wellington Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N30884

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:

Maria S. Leavy

Name of Contact Person

Leavy Law PA

Firm/Company

800 Village Square Crossing Ste 347

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

ejab@barnettmgt.co

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

For further information concerning this matter, please call:

Maria S. Leavy

at (561) 623-2576

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

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

**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: Lakefield North at Wellington Homeowners Association, Inc.
2. The principal office address: 13860 Wellington Trace, Suite 38-186, Wellington, FL 33414
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/27/1989 Document number: N30884
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)

Levy Law

11780 US Highway 1, Suite 105

Palm Beach Gardens, FL 33408

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

Leavy Law PA

500 Village Square Crossing Suite 347

P.O. Box NOT acceptable

Palm Beach Gardens, FL 33410

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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.

Karen Claerbout
Signature of an officer or director

Karen Claerbout
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 confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

6/15/2021
Date

If signing on behalf of an entity:

Maria S. Leavy
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 (04/13)