N31001

(Requestor's Name)

(Address)

(Address)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SABAL LAKES HOMEOWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N31001

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:

David D. Iglesias
Name of Contact Person

Iglesias Law Group, P.A.
Firm/Company

15800 Pines Boulevard, Suite 303
Address

Pembroke Pines, FL 33027
City/State and Zip Code

david@ilegalgroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David D. Iglesias at (954) 362-5222
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

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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: SABAL LAKES HOMEOWNERS ASSOCIATION, INC.

2. The principal office address: DAVENPORT PROF PROP MGMT LLC
6620 LAKE WORTH RD STE F, LAKE WORTH, FL 33467

3. The mailing address (if different):

4. Date of incorporation-qualification: 03/06/1989 Document number: N31001

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)

PESTCOE & IGLESIAS, A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS
2500 WESTON ROAD, SUITE 209
WESTON, FL 33331

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TALLAHASSEE, FLORIDA

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

Iglesias Law Group, P.A.
15800 Pines Boulevard, Suite 303
P.O. Box NOT acceptable
Pembroke Pines, FL 33027

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.

Kristi Eckert
Signature of an officer or director

KRISTI ECKERT PRESIDENT HOA PH1
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 of Registered Agent

12/23/18
Date

If signing on behalf of an entity:

David Iglesias
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

(R2/01/03 LT)