| N36853                                       |   |  |
|--|---|--|
| (Requestor's Name)<br>(Address)<br>(Address) | 900274842049                                  |  |
| (City/State/Zip/Phone #)                     | 900274842049<br>07/13/1501015008 **35.00      |  |
| Certified Copies Certificates of Status      | DIVISION OF CORPORATIONS<br>15 JUL 13 AH 7:50 |  |
| Office Use Only                              | JUL 1 5 2015<br>C LEWIS                       |  |

# HILL LAW FIRM

Cindy A. Hill, Esq.

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Jennifer L. Daly, Esq.

456 S. Tamiami Trail Osprey, FL 34229

www.hill-lawpa.com Telephone: (941) 244-0098 Facsimile: (941) 244-0548 Adam M. Bragg, Esq., of Counsel Matthew J. Thompson, Esq., of Counsel

July 9, 2015

Amendment Section Division of Corporations Clifton Buidling 2661 Executive Center Circle Tallahassee, FL 32301 Via: U.S. Mail

Re: Change of Registered Agent

Dear Representative:

This law firm represents Deer Hollow VI Homeowners Association, Inc. Please find enclosed the Change of Registered Agent form and a check from Deer Hollow Phase VI in the amount of \$35.00 to cover the change.

If you have any questions please contact our office.

Sincerely,

Jennifer L. Daly, Esq. For the Firm

cc: Association

Enclosures

### **COVER LETTER**

#### TO: Amendment Section Division of Corporations

SUBJECT:

DEER HOLLOW VI HOMEOWNERS ASSOCIATION INC.

Name of Corporation

# DOCUMENT NUMBER: N36853

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:

CINDY A. HILL, ESQ.

Name of Contact Person

HILL LAW FIRM, P.A.

Firm/Company

456 S. TAMIAMI TRAIL

Address

**OSPREY, FLORIDA 34229** 

City/State and Zip Code

## caroled5@verizon.net

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

For further information concerning this matter, please call:

| CINDY HILL             | 941         | 244 - 0098                 |
|------------------------|-------------|----------------------------|
|                        | at ()       |                            |
| Name of Contact Person | Area Code & | 2 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

CR2E045 (03/12)

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

1. The name of the corporation: DEER HOLLOW VI HOMEOWNERS ASSOCIATION, INC.

2. The principal office address: 5579 CYNTHIA LANE, SARASOTA, FLORIDA 34235

3. The mailing address (if different):

4. Date of incorporation/qualification: 02/28/1990 Document number: N36853

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)

# BRICKNER, EDWIN

5579 CYNTHIA LANE

SARASOTA, FLORIDA 34235

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

HILL LAW FIRM, P.A.

456 S. TAMIAMI TRAIL

P.O. Box NOT acceptable

OSPREY, FLORIDA 34229

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.

July 9, 2015

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.

ure of Registered Agent

If signing on behalf of an entity:

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 (03/12)