N39000

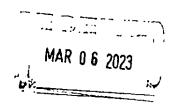
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
MAR 0 6 2023 J. HORNE MAY 2 3 2023				
MAY 2 3 2023				

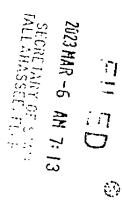
Office Use Only



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05-167555 07-002-4015 8456-00





COVER LETTER

Amendment Section TO: Division of Corporations

SUBJECT: THE SURF AND RACQUET HOMEOWNERS Name of Corporation	ASSOCIAT	ION, INC.
DOCUMENT NUMBER: N39000		
The enclosed Statement of Change of Registered Office/	Agent and f	ee are submitted for filing.
Please return all correspondence concerning this matter t	o the follow	ring:
VICKI LITZ		
Name of Contact Person		
PAPERWORK PIRATE		
Firm/Company		
110 E GRANADA BLVD, STE 105		
Address		
ORMOND BEACH, FL 32176		
City/State and Zip Code		
paperworkpirate@gmail.com		
E-mail address: (to be used for future annual report	notification	1)
For further information concerning this matter, please ca	11:	
VICKI LITZ	at (386)481-0712
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

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.0502, 66 inge is submitted for a corporation organized r to change its registered office or registered	l under the laws of the State of FLOI	RIDA		
1. The name of t	the corporation: THE SURF AND RACQUET	HOMEOWNERS ASSOCIATION, I	NC.		
	office address: 4381 S ATLANTIC AVE. NEV				
3. The mailing a	uddress (if different):				
4. Date of incorp	poration/qualification: 07/02/1990	_ Document number: N39000	<u> </u>		
	d street address of the current registered agent timent of State: (If resigned, enter resigned)	t and registered office on file with the	e		
	KENNETH BOHANNON, ESQ.				
	221 NORTH CAUSEWAY, STE A				
	NEW SMYRNA BEACH, FL 32169		 ,		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
	VICKI LITZ		D		
	P.O. Box NOT acceptable				
	ORMOND BEACH, FL 32176	т ассериоте	7: 13		
The street address changed will	ess of its registered office and the street add be identical.	lress of the business office of its re	gistered agent. 🔌		
Such change wa authorized by th	as authorized by resolution duly adopted by ne board, or the corporation has been notific	its board of directors or by an officed in writing of the change.	cer so		
Lisa Patten		ISA PATTEN			
I hereby accept I further agree of of my duties, an document is bei	the appointment as registered agent and agent to comply with the provisions of all statutes and familiar with and accept the obligating filed merely to reflect a change in the rest been notified in writing of this change.	Printed or typed name and title gree to act in this capacity. It is relative to the proper and completion of my position as registered aggistered office address, I hereby consistered office address, I hereby consistered of the consistered of	te performance ent. Or, if this onfirm that the		
Vactor =	Vacto 7. 1. 02/03/2023				
_S(g	nature of Registered Agent	Date	.		
If signing on be	chalf of an entity:				
VICKI L	1-1-Z yped or Printed Name				

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