N39902

| (Requestor's Name) | |
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| (Address) | |
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| (Address) | |
| | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | |
| | |
| (Document Number) | |
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| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | |
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Office Use Only



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SECRETARY OF MARIE

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COVER LETTER

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|---|-------------------------------------|
| TO: Amendment Section Division of Corporations | |
| SUBJECT: Bay Isles Road Association, Inc. | |
| Name of Corporation | 1 |
| DOCUMENT NUMBER: N39902 | 1 |
| The enclosed Statement of Change of Registered Office/Agent and fee are sub | mitted for filing. |
| Please return all correspondence concerning this matter to the following: | |
| Juan J. Florensa | - |
| Name of Contact Person | |
| Bay Isles Road Association, I | nc. |
| Firm/Company | |
| | · · |
| 501 Bay Isles Road | |
| Address | |
| Longboat Key FL 34228 | ; |
| City/State and Zip Code | |
| jflorensa@longboatkey.org | |
| E-mail address: (to be used for future annual report no | tification) |
| | |
| For further information concerning this matter, please call: | · · |
| Juan Florensa _{at} 941 ,3 | 16-1988 Per 3 |
| Name of Contact Person Area Code & Da | ytime Telephone Namber |
| Enclosed is a \$35.00 check made payable to the Department of State. | 30 PH 3: 35 ANSSEE, FLORIUS Section |
| | mc P |
| Mailing Address: Street Addr | P555: |
| Amendment Section Amendmen | Section BE W |
| | Corporations $\mathcal{L}^{(i)}$ |
| P.O. Box 6327 Clifton But | ding |
| | |

Tallahassee, FL 32301

CR2E045 (03/12)

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 617.1308, 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: Bay Isles Road Association, Inc. |
| 2. The principal office address: 501 Bay Isles Road |
| Longboat Key FL 34228 |
| 3. The mailing address (if different): 600 General Harris Street, Longboat Key, FL 34228 |
| |
| 4. Date of incorporation/qualification: 09/10/1990 Document number: N39902 |
| 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) |
| David P. Persson; Hankin, Persson, etal |
| 1820 Ringling Blvd |
| Sarasota FL 34236 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Maggie D. Mooney-Portale; Persson & Cohen, PA |
| 6853 Energy Court |
| P.O. Box NOT acceptable Lakewood Ranch, FL 34240-8523 |
| 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. |
| Juan J. Florensa, President 🚉 🕎 |
| 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. |
| Magail & Morry-Portale 12/23/13 Signature of Registered Agent Date |
| If signing on behalf of an entity: |
| Maggie D. Moorey-Portale 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)