N46618

(F	Requestor's Name)
(/	Address)
(/	Address)
(0	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(F	Business Entity Name)
(I	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	to Filing Officer:
:	

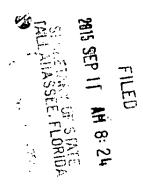
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SEP 15 2015 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

Name of Corporation
N46618

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:

Jeffrey York

Name of Contact Person

SunState Management LLC, Inc.

Firm/Company

9365 W. Sample Road, Suite 202

Address

Coral Springs, FL 33065

City/State and Zip Code

jyork@sunstatecam.com

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

For further information concerning this matter, please call:

Jeffrey York

., 954

510-6552

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

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Ventana at Coral Springs, Homeowners' Association, Inc
	office address: 9365 W. Sample Road, Suite 202 rings, FL 33065
3. The mailing a	Springs, FL 33065
4. Date of incorp	poration/qualification: 12/23/1991 Document number: N46618
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	INTEGRITY PROPERTY MGMT c/o Cynthia Whittle
	5665 Coral Ridge Drive
	Coral Springs, FL 33076
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of the
	SUNSTATE MANAGEMENT LLC, INC.
	9365 W. Sample Road, Suite 202
	P.O. Box NOT acceptable Coral Springs, FL 33065
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by	as authorized by resolution duly adopted by its board of directors or by an officer so be beauty, or the corporation has been notified in writing of the change.
Signate	fre of an othicer or director Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
-/Wh	9/03/15
0 117	chalf of an entity:
0 0	ging Principal, SunState Mgmt, LLC, Inc.
	voed or Printed Name

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