N48947

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COVER LETTER

Division of Corporations		
SUBJECT: The Homes at Sheridan Ocean Club Name of Corporation		
DOCUMENT NUMBER: N48947		
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:		
Shella HANTMAN Name of Contact Person		
Firm/Company		
1150 SE 6th Court		
DANIA, FL 33004 City/State and Zip Code	<u>.</u>	<u></u>
President @ homes atsoc.com E-mail address: (to be used for future annual report notification)	9 AU6 19	SICH OF (
For further information concerning this matter, please call: Shells Hating at (954) P29-6789 Name of Contact Person Area Code & Daytime Telephone No.	PH 2: 30	Y OF STATE
Name of Contact Person at (954) PZ9-6787 Area Code & Daytime Telephone No	umber	<u>-₹</u>

Enclosed is a \$35.00 check made payable to the Department of State.

TO:

Amendment Section

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the statement of change is submitted for a corporation organized under the laws of the State of	\$	_
in order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: The Hones at Shoridan		-
2. The principal office address: 1/50 S 6th CURT		
Dang 12 33004		
3. The mailing address (if different): Box 925		
Dania FL 33004		
4. Date of incorporation/qualification: $5/19/2$ Document number: $1/9/9/4$		_
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)		
Kevin Purvis		
1046 SE 6th Auc		
Dania FC 33004		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		SIVE
Sheila Hantman	<u>宗</u> 衍	URE V
1150 SE 6th Court		RY C
P.O. Box NOF acceptable FL 33004	PH 2	76.5 19.5 19.5
1JGAB PC 33007	ည	<u> </u>
The street address of its registered office and the street address of the business office of its registered as changed will be identical.		nt.
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.		
Sheila & Sheila Hantman Sheila Hantman		
Signature of an office or director Thereby accept the appointment as registered agent and agree to act in this capacity.		
I further agree to comply with the provisions of all statues relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as register agent. Or, if this document is being filed merely to reflect a change in the registered office address, thereby confirm that the corporation has been notified in writing of this change.	ed!	
Shell Hantman 8/13/19 Signature of Registered Agoni		
If signing on behalf of an entity:		
Sheila Hantman		
Typed or Printed Name		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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