## 1900003023

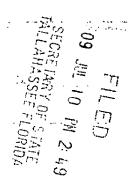
(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	<b>⇒</b> #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

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## **COVER LETTER**

TO:	Amendment Division of	nt Section f Corporations			
SUBJI	ЕСТ: <u></u>	Biscayne Downs Homeov Name of	wners Association, Inc.		
DOCL	JMENT NU	MBER: N93	3000003023	_	
The en	closed State	ment of Change of Registered Offi	ce/Agent and fee are submitted fo	r filing.	
Please return all correspondence concerning this matter to the following:					
			Luckett ontact Person		
ERA Dan Jones & Associates, Inc.					
			Company	<del></del>	
		1403-1 D	unn Avenue		
		Ad	dress	_	
		Jacksonvil	le, FL 32218 and Zip Code		
		City/State	and Zip Code	_	
		daniel lucke	tt@era.com		
	•••	E-mail address: (to be used for		<u>n)</u>	
		`	1	,	
For fur	ther informa	tion concerning this matter, please	call:		
		Daniel Luckett	at ( 904 ) 757-	3466 x144	
	Nan	ne of Contact Person	Area Code & Daytime Te	lephone Number	
Enclos	ed is a \$35.0	0 check made payable to the Depa	rtment of State.		
		Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporat	ione	
		P.O. Box 6327	Clifton Building	lons	
		Tallahassee, FL 32314	2661 Executive Central Tallahassee, FL 3230		

## 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 in $\alpha$ in	Florida
	er to change its registered office or registered agent, or both, in the State of F the corporation: Biscayne Downs Homeowners Association	
		Dunn Avenue
_	lle, FL 32218	<u> </u>
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 06/29/1993 Document number: N	193000003023
	d street address of the current registered agent and registered office on file wi rtment of State: (If resigned, enter resigned)	th the
	Calvin Williams	_
	11498 SIR BARTON COURT	쩐 .
	Jacksonville, FL 32218	09 ( SECR
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered off	FILED JUL 10 PN ETARY OF S HASSEE FL
	ERA Dan Jones & Associates, Inc.	_ ES = C
	1403-1 Dunn Avenue P.O. Box NOT acceptable	2: 49 STATE LORIDA
	Jacksonville, FL 32218	, <u>(1</u> )
The street address changed will	ess of its registered office and the street address of the business office of it be identical.	- ts registered agent,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an ne board, or the corporation has been notified in writing of the change.	officer so
Calin 1.	6. 30 Mamo CALVIN G. WILLIAMS, Printed or typed name and to	Cliair, Board of Director
I hereby accept I further agree of my duties, an document is bei	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 cond I am familiar with and accept the obligation of my position as registereng filed merely to reflect a change in the registered office address, I herely been notified in writing of this change.	
Sig	MA (M) 7/8/09  Mature of Registered Agent Date	
If signing on be	half of an entity:	
So	no Ingram	

\* \* \* 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 (8/05)