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COVER LETTER

Amendment Section TO: Division of Corporations SUBJECT: Mystic Greens II Condominium Association, Inc. Name of Corporation N94000003118 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: Bryan Fowler
Name of Contact Person Southwest Property Management 1044 Castello Drive, Suite 206 Naples, FL 34103 City/State and Zip Code bfowler@swpropmgt.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bryan Fowler Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address: Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of change is submit	ted for a corporation org	502, 607.1508, or 617.1508, Floranized under the laws of the Sta	nte of Florida
		istered agent, or both, in the Sta	
1. The name of the corporation	_{n:} Mystic Greens II	Condominium Associa	ition, Inc.
2. The principal office addres			
3. The mailing address (if diff	ferent): Same as abo	ove	
4. Date of incorporation/quali	fication: 06/24/199	4 Document number: _N	194000003118
	is of the current registere	d agent and registered office on	file with the
James K	elly		
9150 Ga	alleria Court Suite	201	20191:57: -1
NAPLES	, FL 34109		=
6. The name and street addres (if changed):	ss of the new registered a	gent (if changed) and /or registe	red office 33
Bryan Fo	wler, c/o Southwe	st Property Manageme	
1044 Ca		206, Naples, FL 34103	
	PO Box N	IOT acceptable	
as changed will be identical.		et address of the business office	
Signature of an officer or	director	ted by its board of directors or be notified in writing of the change to	e and title.
I hereby accept the appointm I further agree to comply wit performance of my duties, ar agent. Or, if this document is hereby confirm that the corp	nent as registered agent th the provisions of all st nd I am familiar with and is being filed merely to r oration has been notified	and agree to act in this capacit latutes relative to the proper an d accept the obligation of my po eflect a change in the registered d in writing of this change.	y. d complete osition as registered d office address, I
1/2		10/17/1	4
Signature of Register If signing on behalf of an end	_	Date	
Typed or Printed N	ате		
	* * * FILING	FEE: \$35.00 * * *	