N94000003461

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



300257467253

03/06/14--01007--017 **25.00

300257467253 03/26/14--01003--001 **10.00

> 3141 S 40 ANNI 3803S 3141 S 40 ANNI 3803S

14 MAR 26 AH 8: 22

C. LEWIS

MAR 27 2014

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 10, 2014

ERUM S. KISTEMAKER / KISTEMAKER BUSINESS LAW GROUP 1651 N. CLYDE MORRIS BLVD SUITE 1 DAYTONA BEACH, FL 32117 US

SUBJECT: GOLF VILLAS HOMEOWNERS' ASSOCIATION, INC.

Ref. Number: N94000003461

We have received your document for GOLF VILLAS HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 614A00005165

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GOLF VIJOS HONLOWALK PSSOCIOTION, Inc.

Name of Corporation

DOCUMENT NUMBER: 194000 34/6/

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:

(YUM Nistemater Russiness Law Livoop Firm/Company

LUSI N. Clycl Morris Blvd Suite1

Douton Boch FL Ball 7

City/State and Zip Code

Existemates (to be used for future annual report notification)

For further information concerning this matter, please call:

Evum Kistemaker at (386) 310 7997
Name of Contact Person Area Code & Davigne 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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this 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: GOIF VILLAS HONEQUILLS' ASSOCIATION, INC.
2. The principal office address: 1190 Pelicon Bay Dr.
Daytona Beach, FL 32119
3. The mailing address (if different):
4. Date of incorporation/qualification: 3-20-2003 Document number: NG40000344
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)
Barkin Midule
1190 Pelican Bay Dr.
Dayona Beach, FL 32119
5. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Listemaku Business Law Group 3 3 8
1651 N Clydle Morris Bld Slite 1
Daytona Beach, Fl 32117
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.
Signal of of an officer of director Belly Craw ford
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.
Signature of Registered Agent 3-18-14
f signing on behalf of an entity: Erum Kistemaker Kistemaku Business Low Group Trosd of Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF \$1ATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)