

N94000005613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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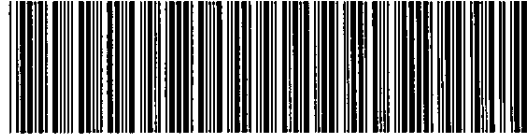
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JUL 27 PM 12:57

JUL 29 2015
C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Central Hills Maintenance Association, Inc.

Name of Corporation

N94000005613

DOCUMENT NUMBER: _____

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:

Cory B. Kravit, Esq.

Name of Contact Person

Kravit Law, P.A.

Firm/Company

1801 N. Military Trail, Suite 120

Address

Boca Raton, FL 33431

City/State and Zip Code

CoryKravit@KravitLaw.net

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

For further information concerning this matter, please call:

Cory B. Kravit, Esq.

561

922-8536

Name of Contact Person

at (_____) _____

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**

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Central Hills Maintenance Association, Inc.
2. The principal office address: c/o Castle Group 12270 SW 3rd Street, Suite 200
Plantation, FL 33325
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/14/1994 Document number: N94000005613

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)

Kravit Law, P.A.

7000 W. Palmetto Park Road, Suite 210

Boca Raton, FL 33433

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Kravit Law, P.A.


1801 N. Military Trail, Suite 120

P.O. Box NOT acceptable

Boca Raton, FL 33431

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.




Signature of an officer or director

LAWRENCE T ELLMAN

Printed or typed name and title

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

7/24/15

Date

If signing on behalf of an entity:

Cory Kravit

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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