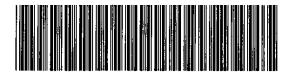
N95000000512

| (Requestor's Name) | | |
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| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| | | |
| (Business Entity Name) | | |
| • | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATE
TALLAHASSEF, FI COME.

R-A Chark

C. Coulliette JAN 0 5 2086

COVER LETTER

Division of Corporations SUBJECT: L'Ambiance Commons Association, Inc. (Name of Corporation) DOCUMENT NUMBER:_ N95000000512 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: John B. Blanchard (Name of Contact Person) Eagle Property Management of SW FL, Inc. (Firm/Company) P. O. Box 112260 (Address) Naples, FL 34108 (City/State and Zip Code) For further information concerning this matter, please call: John B. Blanchard (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

:OT

Amendment Section

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

| statement of cha | hange is submitted for a corporation organized under the laws of the State of Florida | |
|---|---|----------|
| | der to change its registered office or registered agent, or both, in the State of Florida. | |
| | f the corporation: L'Ambiance Commons Association, Inc. | |
| | al office address: Eagle Property Management of SW FL, Inc. | |
| | address (if different): P. O. Box 112260 | |
| Naples, FL 3 | | |
| 4. Date of incorp | prporation/qualification: 2/1/1995 Document number: N95000000512 | |
| | nd street address of the current registered agent and registered office on file with the artment of State: | |
| | Kramer-Triad LLC | |
| | 3050 Horseshoe Dr. N. #275 | |
| • | Naples, FL 34105 | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Eagle Property Management of SW FL, Inc. 1337 Farsets Landing # 103 | | |
| | Eagle Property Management of SW FL, Inc. | <u> </u> |
| | 1337 Egrets Landing # 102 | LED |
| • | (P.O. Box NOT acceptable) Naples, FL 34108 | _ |
| The street addre | ress of its registered office and the street address of the business office of its registered agent, ll be identical. | ı |
| Such change wa authorized by th | vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. | |
| (Karles | Charles A. Gallon, Preside (Printed or typed name and title) | at |
| I hereby accept I further agree t of my duties, an document is bei corporation has | of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this cing filed merely to reflect a charge in the registered office address, I hereby confirm that the his been notified in writing of this change. | e S |
| (Sig | Signature of Registered Agent) (Date) | |
| If signing on be | chalf of an entity: B. BLAWHARD CAM. #23885 | |
| · (T | (Typed or Printed Name) | |

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