N95000005338

	questor's Name)		
(Rec	questor's (vame)		
(Add	dress)		
(Add	dress)		
(City	y/State/Zip/Phone	= #)	
•			
PICK-UP	WAIT	MAIL	
	alaana Eutika Maa		
(Bus	siness Entity Nan	ne)	
(Doc	cument Number)		
Certified Copies	Certificates of Status		
<u> </u>			
Special Instructions to F	-iling Officer:		





700298963167

07/14/17--01016--030 ++35.00

PRINT JUL 14 AH 9: 36

O MICHAIR



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

ro: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Rachel O'Hayer rachel.ohayer@cscglobal.com

Date: July 12, 2017

Order#: 696975/005

Re: COCONUT PALMS BEACH RESORT II OWNER'S ASSOCIATION, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Rachel O'Hayer c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.



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

statement of che	ange is submitted for a corporati	. 617.0502, 607.1508, or 617.1508, Florida Statutes, to on organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.	his
1. The name of	the corporation: Coconut Palms	Beach Resort II Owner's Association, Inc.	
		Avenue, New Smyrna Beach, FL 32169	
3. The mailing a	address (if different): One Vance	Gap Road, Attn: Legal Dept., Asheville, NC 28805	
4. Date of incorp	poration/qualification: 11/13/199	95 Document number: <u>N95000005338</u>	
	d street address of the current reg rument of State: (If resigned, ente	istered agent and registered office on file with the resigned)	٠,.
	Kosmas, James MP.A.		是 SIA
	111 Live Oak Street		BAT JUL 14
	New Smyrna Beach	FL 32168	= 5
6. The name and (if changed):	l street address of the new registe	red agent (if changed) and /or registered office	M 9: 35
	Corporation Service Company		ණ
	1201 Hays Street		
		Box NOT acceptable	
	Tallahassee	FL 32301	
The street address as changed will	ss of its registered office and the	e street address of the business office of its registered	d agent,
Such change was authorized by the	s authorized by resolution duly a e board, or the corporation has b	adopted by its board of directors or by an officer so seen notified in writing of the change.	
1/1/30	1/1/2	Jared Resch, Secretary	
Signatur	e of an officer or director	Printed or typed name and title	
Surther agree to performance of r agent. Or, if this hereby confirm t	o comply with the provisions of a nv duties, and I am familiar with	gent and agree to act in this capacity. all statutes relative to the proper and complete h and accept the obligation of my position as registe. to reflect a change in the registered office address, tified in writing of this change.	red I
By: I Ina	co Yokubie	07/12/2017	
	ature of Registered Agent	Date	
f signing on beh	alf of an entity:		
Grace E. Kirby, /	Asst. Vice President		
Typ	ood or Printed Name	•	

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