114000008PM

| (Requestor's Name) |
|---|
| (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. |
| |
| |
| |

Office Use Only



600434689606

2024 OCT 18 PH 4: 01

RECEIVED

CORPORATION SERVICE COMPANY

1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

| ACCOUNT NO. : | 12000000195 | | | |
|--|----------------|--|--|--|
| REFERENCE : | 700557 8461475 | | | |
| AUTHORIZATION : | | | | |
| COST LIMIT : | 7.3% | | | |
| ORDER DATE : October 15, 2024 | | | | |
| ORDER TIME : 1:55 PM | | | | |
| ORDER NO. : 700557-053 | | | | |
| CUSTOMER NO: 8461475 | | | | |
| | | | | |
| CHANGE OF AGENT | | | | |
| | | | | |
| NAME: THE RESORT AT WORLD GOLF VILLAGE CONDOMINIUM ASSOCIATION, INC. | | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | | |
| CERTIFIED COPY XX PLAIN STAMPED COPY | | | | |
| CONTACT PERSON: Shauna Godbolt EXT# | | | | |

EXAMINER:

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

| statement of cha | provisions of sections 607.0502, 617.050 age is submitted for a corporation organ to change its registered office or regist | nized under the laws of the State of | <u>r_FL</u> |
|---|---|---|--|
| 1. The name of t | he corporation: THE RESORT AT WOR | RLD GOLF VILLAGE CONDOMIN | IUM ASSOCIATION, INC |
| 2. The principal | office address: | | |
| 3. The mailing a | ddress (if different): | | |
| 4. Date of incorp | oration/qualification: 01/23/1998 | Document number: N9800 | 0000417 |
| | street address of the current registered a tment of State: (If resigned, enter resign | - | vith the |
| | CORPORATE CREATIONS NETWO | RK INC. | <u> </u> |
| | 801 US HIGHWAY 1 | | *** |
| | NORTH PALM BEACH, FL 33408 | | |
| 6. The name and (if changed): | street address of the new registered age | nt (if changed) and /or registered of | office |
| | Corporation Service Company | | • |
| | 1201 Hays Street | | _ , |
| | | x NOT acceptable | |
| | Tallahassee | FL 32301 | |
| The street addre | ss of its registered office and the street be identical. | address of the business office of | its registered agent. |
| Such change wa authorized by th | s authorized by resolution duly adopte the board, or the corporation has been no | d by its board of directors or by a otified in writing of the change. | n officer so |
| /s/Jeff Carpe | nter | Jeff Carpenter | Secretary |
| Signatur | e of an officer or director | Printed or typed name and | inte |
| I further agree t of my duties, an document is bei corporation has | the appointment as registered agent at a comply with the provisions of all stat of I am familiar with and accept the obl ng filed merely to reflect a change in th been notified in writing of this change n Service Company | tutes relative to the proper and co ligation of my position as register he registered office address. I her | omplete performance ed agent. Or, if this eby confirm that the |
| By: Drace | Hat h | 09/27/2024 | |
| Sign | nature of Registered Againt | Date | |
| If signing on be | half of an entity: | | |
| | Asst. Vice President ped or Printed Name | | |
| | * * * FILING FI | EE: \$35.00 * * * | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13) 700557-53