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		Division of Corporations			
		Fax Number : (850)617-6380		2022	
		From:	:	12	
		Account Name : C T CORPORATION SYSTEM	•	00	
		Account Number : FCA00000023	2.		
-	8	Phone : (954)208-0845	<u> </u>	<u> </u>	
· • •		Fax Number : (614)573-3996	ā	-	1
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REGISTERED AGENT CHANGE

CHASE TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

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

1. The name of the corporation: CHASE TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

2. The principal office address: 8529 Southpark CirSuite 330

Orlando, FL 32819

The mailing address (if different): ______

- 4. Date of incorporation/qualification: 10/20/1999 Document number: N9900006285
- 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)

Rizzetta & Company Inc.

3434 Colwell Ave Suite 200

Tampa, FL 33614

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

C T Corporation System

1200 South Pine Island Road

P.O. Box: NOT acceptable

Valene Rosania.

Plantation, Florida 33324

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.

VALERIE	ROSP	NIA

Signature of an officer or director

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. Thereby confirm that the corporation has been notified in writing of this change.

C T Corporation System By: Signature of Registered Ag

10/07/2022 Date

Board President Printed or typed name and title

If signing on behalf of an entity:

Terrie Bates, Assistant Secretary

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 CR2E045 (04/13)

VALERIE ROSAMA