

PU20000 79811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2019/11/14 PM 3:59

C. GOLDEN
NOV 19 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bayside Property Mgmt. & Real Estate Svc.
Name of Corporation

DOCUMENT NUMBER: P02000079811

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:

LYNDA KELLY
Name of Contact Person

Bayside Property Mgmt. & Real Estate Svc.
Firm/Company

1115 Kingsway Ln.
Address

Tarpon Springs, FL 34688
City/State and Zip Code

Lkelly@Baysideprop.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LYNDA KELLY at (727) 787-3727
Name of Contact Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 5, 2019

LYNDA KELLY
POST OFFICE BOX 94
OLDSMAR, FL 34677

SUBJECT: BAYSIDE PROPERTY MANAGEMENT AND REAL ESTATE
SERVICES CORPORATION
Ref. Number: P02000079811

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The capacity of the person signing the document must be typed or printed beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 219A00020512

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

BAYSIDE PROPERTY MANAGEMENT AND REAL ESTATE SERVICES CORPORATION

1. The name of the corporation: _____
2. The principal office address: 1115 Kings Way Ln.
Tarpon Springs, FL 34688
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/22/2002 Document number: PO2000079811
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)

LYNDA KELLY
3901 BELMOOR DR
Palme Harbor, FL 34685

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

LYNDA KELLY
1115 Kings Way Ln.
P.O. Box NOT acceptable
Tarpon Springs, FL 34688

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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]
Signature of an officer or director

LYNDA KELLY, President
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]
Signature of Registered Agent

11-11-19
Date

If signing on behalf of an entity:

LYNDA KELLY
Typed or Printed Name

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