

PO8000053996

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*[Signature]*

JUN 5 2013

T. LEMIEUX

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Villa Palma of Sarasota, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P08000053996

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:

Joseph R. Ulicny

Name of Contact Person

Firm/Company

120 W. Second Street, #208

Address

Dayton, Ohio 45402

City/State and Zip Code

joe.ulicny@libertysavingsbank.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph R. Ulicny

Name of Contact Person

at ( 937 ) 224-4572

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



*Our Interest Is In You*

[www.libertysavingsbank.com](http://www.libertysavingsbank.com)

Writer's Direct Information:  
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[amanda.baker@libertysavingsbank.com](mailto:amanda.baker@libertysavingsbank.com)

May 28, 2013

**Via First Class Mail**

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Statement of Change for Registered Agent  
Document No. P08000053996

To Whom it May Concern,

Enclosed please find the Statement of Change of Registered Agent for Villa Palma of Sarasota, Inc., along with a check for \$35.00 for the filing fee.

Should you have any questions please feel free to contact me.

Sincerely,

**Liberty Savings Bank, FSB**

Amanda Pearson-Baker  
Executive Admin. Assistant

Enclosures

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

1. The name of the corporation: Villa Palma of Sarasota, Inc.  
2. The principal office address: 2323 Stickney Point Rd., Sarasota, FL 34231  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: June 2, 2008 Document number: P08000053996

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)

Joseph R. Ulicny  
120 W. Second Street, Suite 208  
Dayton, FL 45402 US


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

Matthew A. Kluding  
2323 Stickney Point Rd.  
P.O. Box NOT acceptable  
Sarasota, FL 34231 US

2013 JUN -3 PM 4:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

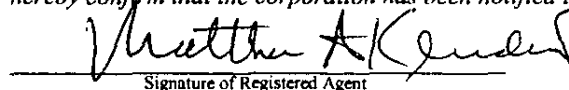
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director

Joseph R. Ulicny, Vice 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 of Registered Agent

May 7, 2013  
Date

If signing on behalf of an entity:

Matthew A. Kluding, 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 (03/12)