

# NORTH CAROLINA Department of the Secretary of State

### To all whom these presents shall come, Greetings:

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

#### CHANGE OF REGISTERED OFFICE AND/OR REGISTERED AGENT

**OF** 

#### BRIARCLIFF CONDOMINIUM ASSOCIATION, INC.

the original of which was filed in this office on the 28th day of September, 2018.





IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 28th day of September, 2018.

Elaine J. Marshall

**Secretary of State** 

SOSID: 0134276 Date Filed: 9/28/2018 8:59:00 AM Elaine F. Marshall North Carolina Secretary of State

C2018 229 00580

## STATE OF NORTH CAROLINA DEPARTMENT OF THE SECRETARY OF STATE

## STATEMENT OF CHANGE OF REGISTERED OFFICE AND/OR REGISTERED AGENT

Pursuant to §55D-31 of the General Statutes of North Carolina, the undersigned entity submits the following for the purpose of changing its registered office and/or registered agent in the State of North Carolina.

INFORMATION CURRENTLY ON FILE		
The name of the entity is: Briarcliff Condominium Association, Inc		
The street address and county of the entity's registered office currently on file is:		
Number and Street: 605 Executive Place		
City: Fayetteville State: NC Zip Code: 28305	County:	Cumberland
The mailing address if different from the street address of the registered office currently on file is:		
Number and Street: PO Box 40812		,
City: Fayetteville State: NC Zip Code: 28309	County:	
The name of the current registered agent is: Connie Miller Leathers		
NEW INFORMATION		
1. The street address and county of the new registered office of the entity is:  (complete this item only if the address of the registered office is being changed)		
Number and Street: 2939 Breezewood Avenue Suite 100  City: Fayetteville State: NC Zip Code: 28303	County:	Cumberland
2. The mailing address if different from the street address of the new registered office is:		
(complete this item only if the address of the registered office is being changed)  POBOX 87209		
Number and Street: P O Box 87209  City: Fayetteville State: NC Zip Code: 28304		Cumberland
3. The name of the new registered agent and the new agent's consent to appointment appears below:  (complete this item only if the name of the registered agent is being changed)		
Little Young Inc.	Not	XIX Secretar
Type or Print Name of New Agent	*25	ignature & Title
<ol> <li>The address of the entity's registered office and the address of the business office of its registered agent, as changed, will be identical.</li> </ol>		
5. This statement will be effective upon filing, unless a date and/or time is specified:		
This is theday of, 20 Briarcliff C		ninium Association, Inc
Jan		ntity Name
Signature Tammy Six, Secretary		
Notes: Filing fee is \$5.00. This document must be filed with the Secretary of State. Type or Print Name and Title		
* Instead of signing here, the new registered agent may sign a separate written consent to the appoint BUSINESS REGISTRATION DIVISION P. O. BOX 29622  Registed July 2017	inent, Which	RALEIGH, NC 27626-0622