



State of Missouri
John R. Ashcroft, Secretary of State

Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

N01194860
Date Filed: 12/24/2019
John R. Ashcroft
Missouri Secretary of State

Statement of Change of Registered Agent and/or Registered Office
By a Foreign or Domestic For Profit or Nonprofit Corporation or a Limited Liability Company

Instructions

1. This form is to be used by either a for profit or nonprofit corporation or a limited liability company to change either or both the name of its registered agent and/or the address of its existing registered agent.
2. There is a \$10.00 fee for filing this statement.
3. PO Box may only be used in conjunction with a physical street address.
4. Agent and address must be in the State of Missouri.
5. The corporation may not act as its own agent.

Charter #: N01194860

1. The name of the business entity is Columbia Vineyards Homeowners Association

2. The address, including street and number, of its present registered office (before change) is

305 E McCarty Street, Suite 300, Jefferson City, MO 65101
Address City/State/Zip

3. The address, including street and number, of its registered office is hereby changed to:

3700 Monterey Dr, Ste E, P.O. Box 1274, Columbia, MO 65205
Address (PO Box may only be used in conjunction with a physical street address). City/State/Zip

4. The name of its present registered agent (before change) is: MSB Registered Agent

5. The name of the new registered agent is: Pat Bess

Authorized signature of new registered agent must appear below:

Pat Bess
(May attach separate originally executed written consent to this form in lieu of this signature)

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

7. The change was duly authorized by the business entity named above.

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo)

Jeffery D Hayes
Authorized signature of officer, member, manager or, if applicable, chairman of the board

JEFFERY D HAYES
Printed Name

President
Title

12/19/19
Date

Name and address to return filed document:

Name: Community Association Management

Address: P.O. Box 1274

City, State, and Zip Code: Columbia, MO 65205

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Change Agent/Address