716056

| (Re | equestor's Name) | |
|---|--------------------|-------------|
| (Address) | | |
| (Ac | idress) | |
| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nar | me) |
| (Document Number) | | |
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COVER LETTER -

| TO: Amendment Division of O | | |
|--------------------------------|--|---|
| SUBJECT: Hill | sboro Le Baron Condomir Name of Cor | nium Apartments, Inc. |
| | . talle 5. 55 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| DOCUMENT NUM | IBER:71 | 6056 |
| The enclosed Statem | ent of Change of Registered Office/ | Agent and fee are submitted for filing. |
| Please return all corr | espondence concerning this matter to | o the following: |
| | DANIEL WAS | SERSTEIN |
| _ | Name of Conta | act Person |
| _ | WASSERST | |
| | Firm/Com | ipany |
| | 301 YAMATO ROA | D, SUITE 2199 |
| _ | Addre | SS |
| _ | BOCA RATON | , FL 33431 |
| _ | City/State and | Zip Code |
| | danw@wassers | teinpa.com |
| E | E-mail address: (to be used for fut | ure annual report notification) |
| For further informati | on concerning this matter, please ca | N: |
| | EL WASSERSTEIN | at (561) 288-3999 Area Code & Daytime Telephone Number |
| Name | e of Contact Person | Area Code & Daytime Telephone Number |
| Enclosed is a \$35.00 | check made payable to the Departm | eent of State. |
| | Mailing Address: Amendment Section | Street Address: Amendment Section |
| | | |
| | Division of Corporations | Division of Corporations |

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tailahassee, FL 32314

TO:

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: Hillsboro Le Baron Condominium Apartments, Inc. |
| 2. The principal office address: 1051 Hillsboro Mile, Hillsboro Beach, FL 33062 |
| |
| 3. The mailing address (if different): n/a |
| 4. Date of incorporation/qualification: 2/14/1969 Document number: 716056 |
| 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) |
| ST. JOHN ROSSIN PODESTA & BURR, PLLC |
| 1601 FORUM PLACE, SUITE 700 |
| WEST PALM BEACH, FL 33401 |
| WEST PALM BEACH, FL 33401 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): WASSERSTEIN, P.A. 301 YAMATO ROAD, SUITE 2199 |
| WASSERSTEIN, P.A. |
| |
| P.O. Box NOT acceptable BOCA RATON, FL 33431 |
| |
| 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 Signature of an officer or director Signature of an officer or director 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 composation has been notified in writing of this change. |
| Signature of Righstere Agent |
| If signing on behalf of an entity: |
| Daniel Wasserstein 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 (8/05)