730850

(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
<u> </u>		
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: ORIOLE GARDENS CONDOMINIUM THREE ASSOC Name of Corporation 730850 DOCUMENT NUMBER:_ 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: Marlene Bernstein Name of Contact Person Seacrest Services, Inc. Firm/Company 2400 Centrepark W Dr. #175 Address West Palm Beach, FL 33409 City/State and Zip Code MBERNSTEIN@SEACRESTSERVICES.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Marlene Bernstein Area Code & Daytime Telephone Number Name of Contact Person 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

- STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\frac{Fl}{Fl}$ are to change its registered office or registered agent, or both, in the State of Flo	orida	<i>-</i>	_
	the corporation: Oriole Gardens Condominium Three Association		. Inc	<u>;. </u>
2. The principal	office address: 7400 N.W. 1St Street			
Margate, F				
3. The mailing a	address (if different): 2400 Centrepark W. Dr, Suite 175		-	
	lm Beach, FL 33409			
4. Date of incorp	poration/qualification: 9/36/1974 Document number:	73085	0	
	d street address of the current registered agent and registered office on file with timent of State: (If resigned, enter resigned)	the		
•	Cunningham, Gary	\$		
	7400 N W 1st Street			1
	Margate, FL 33063	ASS.		
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office		H 9: 5	E D
	Backer Law Firm, PA	D.F.	50	
	400 South Dixie Highway, Suite 420			
	P.O. Box NOT acceptable			
	Boca Raton FL 33432			
The street address changed will	ess of its registered office and the street address of the business office of its in be identical.	registere	i agei	nt,
Such change wa authorized by the	authorized by resolution duly adopted by its board of directors or by an or be board, or the corporation has been notified in writing of the change.	fficer so)	1/
	Printed or typed name and title	RTA	<i>\$</i> \$.	= 1/1
	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp id I am familiar with and accept the obligation of my position as registered of the filed merely to reflect a change in the registered office address, I hereby been notified in writing of this change.	lete perfo agent. O confirm	ormar r, if ti that t	ıce his he
	nature of Registered Agent O 600 11			_
L				
It signing on be	half of an entity:			
KENTH T	F. BACKER Pres- yped 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)