742131

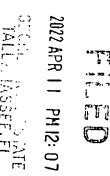
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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04/11/22--01084--004 **35.00



of 5/14/2022

COVER LETTER

TO:	Amendment Section Division of Corporations						
SUBJ Name	ECT: Delaire Country Club, Inc. of Corporation						
DOCU	JMENT NUMBER: 742131						
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.							
Please	return all correspondence concerning this	s matter to the following:					
Fernar	ndo Sanchez Elias						
Name	of Contact Person						
Delair	e Country Club, Inc.						
Firm/C	Company						
4645 V	White Cedar Lane						
Addre	SS						
Delray	Beach, Florida 33445						
City/S	tate and Zip Code						
FSANCHEZ@DELAIRE.ORG							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Fernar	ndo Sanchez Elias	at (561) 902-1186					
	Name of Contact Person	at (561) 902-1186 Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.							
	Mailing Address:	Street Address:					
	Mailing Address: Amendment Section	Amendment Section					
	Division of Corporations	Division of Corporations					
P.O. Box 6327 The Centre of Tallahassee							

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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 6 unge is submitted for a corporation organized under the la er to change its registered office or registered agent, or bot	ws of the State of	Florida		
	the corporation: Delaire Country Club, Inc.	,			
	office address: 4645 White Cedar Lane				
3. The mailing a	address (if different):				
4. Date of incorp	poration/qualification: 03/20/1978 Document	number:			
	d street address of the current registered agent and registere rtment of State: (If resigned, enter resigned)	ed office on file w	ith the		
	Linda Rodgers (RESIGNED)		_		
	4645 White Cedar Lane				
	Delray Beach, Florida 33445		SECR TAL	2022 A	£-1-0-
6. The name and (if changed):	d street address of the new registered agent (if changed) an	d /or registered of	Tice As	2022 APR 11 PM 12: 01	(7) 7
	Robin Blankhorst		- <u></u>	PH	} € 6
	4645 White Cedar Lane]-]- [[A]	2: 0	
	P.O Box NOT acceptable				
	Delray Beach, Florida 33445		_		
The street address changed will	ess of its registered office and the street address of the bulbe identical.	usiness office of i	ts regist	ered ag	ent.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of he board, or the corporation has been notified in writing	directors or by an of the change.	officer	so	
David B. Kaplan President Signature of an officer or director David B. Kaplan President Printed or typed name and title					<u> </u>
l further govee t of my duliek, un document ik bei	t the appointment as registered agent and agree to act in to comply with the provisions of all statutes relative to th ad I am familiar with and accept the obligation of my pos ing filed merely to reflect a change in the registered offic s been notified in writing of this change.	this capacity, he proper and con sition as registere ce address, I here	nplete p ed agent by confi	erform Or, if rm that	ance this the
04/05/					
Sig	gnature of Registered Agent	Date			
Voban !	Shalf of an entity: Devn 10 % Typed or Printed Name				

* * * FILING FEE: \$35.00 * * *