## 751368

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(Red	questor's Name)	
(Add	tress)	
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(City	//State/Zip/Phone	<i>#</i> )
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	illing Officer:	
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Office Use Only



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## **CHECK REQUEST FORM**

Date: 8-8-03	Due Date:
Amount Requested: \$	Invoice
Payable To: Florida	a Dept of State
Chart of Account Cod	le: 50300 - 1900/1808 & Fr
Prepared By:	Approved By:

301 West Camino Gardens Boulevard • Suite 200 • Boca Raton FL 33433

Phone: 561.392-0977

Fax: 561.361-0347

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Bel Marra Condominium Association,
DOCUMENT NUMBER: 751368
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:
Jayme Gelfand (Name of person)
Glen Management Services Inc. (Name of firm/company)
301 W. Canino Gordens Blud. Suite 200
Boca Ratow FL. 33432 (City/state and zip code)
For further information concerning this matter, please call:
Jayme Gelfand at (56) 392-0977 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes,
this statement of change is submitted for a corporation organized under the laws of the State of
Flonda in order to change its registered office or registered agent, or both, in the State
of Florida.
1. The name of the corporation: Bel Marra Condominium Assoc. Ta
2. The principal office address: 301 W. Camino Gardons Blud, 5te. 200
Boca Raton, FL 33432
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/4/1980 Document number: 751368
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Patrick Whales FF & T
5255 N. Federal How 2nd BE N
Boca Raton FL 33487 FE = 17
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Cloude Gelfond  Cloude Management Senices
301 W. Comino Gordens Blud. He. 200
Boca Raton FL 33432
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, chairman of vice chairman of the board) (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 corporation has been notified in writing of this change.
(Signature of Registered Agent)  8 7 03 (Date)
If signing on behalf of an entity:
Tayne Geltand V-resident (Capacity)

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