754061

(Re	questor's Name)	<u> </u>		
(Ad	dress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #) .		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
	•			

Office Use Only



400269324554

02/12/15--01016--023 **35.00

15 FEB | 2 PM 3: 35

COVER LETTER

TO:	Amendment Section Division of Corporations					
	The Conquistador Condon	ทากโบเท				
SUBJE						
	SCT: Apartments of St. Augustin Name of Corpora	ition				
DOCU:	MENT NUMBER:	61				
The end	closed Statement of Change of Registered Office/Ager	nt and fee are submitted for filing.				
Please r	return all correspondence concerning this matter to the	following:				
	DANIEL WASSER					
	Name of Contact P	erson				
	WASSERSTEIN Firm/Company	<u>, P.A.</u>				
	i illi Compan	,				
	6501 CONGRESS AVENI	IF SUITE 100				
	Address					
	BOCA RATON, FL	. 33487				
	City/State and Zip	Code				
danw@wassersteinpa.com						
E-mail address: (to be used for future annual report notification)						
For furt	ther information concerning this matter, please call:					
	DANIEL WASSERSTEIN at (561 \ 288-3999				
	Name of Contact Person	561 288-3999 Area Code & Daytime Telephone Number				
Enclose	ed is a \$35,00 check made payable to the Department of	of State.				
	Mailing Address:	Street Address:				
	Amendment Section Division of Corporations	Amendment Section				
	P.O. Box 6327	Division of Corporations Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

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

	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 \underline{F}			
	er to change its registered office or registered agent, or both, in the State of Flo		******	
	The Conquistador Condominium			
	the corporation: Apactments of St. Augustine Shores			
2. The principal	office address: 17 CASTANIA COURT, ST. AUGUSTINE, FL 320)86		
3. The mailing	address (if different): N/A			
		············		
4. Date of incor	poration/qualification: 9/19/1980 Document number:	754061		
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	n the		
	CHRISTOPHER M. COBB, ESQUIRE		5	TAT SE
	701 RIVERSIDE PARK PLACE, SUITE 302		fΕB	
	JACKSONVILLE, FL 32204		2	ASS
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	ce	P M 3:	EE FL
	WASSERSTEIN, P.A.		သ္ဌ	ORIO
6501 CONGRESS AVENUE, SUITE 100				\triangleright
	P.O Box NOT acceptable			
	BOCA RATON, FL 33487			
The street addr as changed wil	ress of its registered office and the street address of the business office of its I be identical.	s registered a	gent,	
Such change wauthorized by	vas authorized by resolution duly adopted by its board of directors or by an the board of the corporation has been notified in writing of the change.	officer so		
Jem	JERENY ?. DUNCAN, ure of an officer or director Printed or typed name and ut	Prosi	000	7
I hereby accept further agree of my duties, a document is he corporation he	of 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 come and it is familiar with and accept the obligation of my position as registered in filed merely to reflect a change in the registered office address, I hereby the proving of this change.	plete perforn I agent. Or sy confirm the	iance if this it the	
Yell	MUULDAR 2617 grinture of Registered Agent Date			
	chalf of an entity:			
5 5	·			
	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)