

N04373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

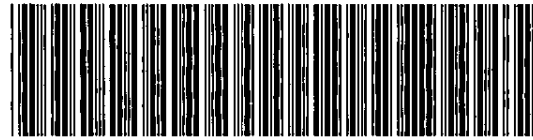
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 22 2014

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Attorneys at Law



Leigh C. Katzman, Esq.
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August 12, 2014

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

***Re: The Villages at Lake Pine II Homeowners' Association, Inc.
Change of Registered Agent***

Dear Sir / Madam:

Enclosed please find the *Statement of Change of Registered Office or Registered Agent or Both for Corporations* which has been properly completed by this office. Furthermore, enclosed please find a check made payable to the Florida Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed above.

Sincerely,

KATZMAN GARFINKEL

Leigh C. Katzman, Esquire
Partner

LCK:kmc
Enclosures

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: The Village at Lake Pine II Homeowners' Association, Inc.
2. The principal office address: 1325 S.W 120th Way
Davie, FL 33325-3844
3. The mailing address (if different): P.O Box 802
Pompano Beach, FL 33061
4. Date of incorporation/qualification: 07/26/1984 Document number: N04373
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)

Edward A. Holodak, FP
2500 Hollywood Blvd., Suite 212
Hollywood, FL 33020

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

KATZMAN GARFINKEL
5297 WEST COPANS ROAD
P.O. Box NOT acceptable
MARGATE, FLORIDA 33063

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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.

Cheryl Beale, Pres.
Signature of an officer or director

Cheryl Beale, President
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]
Signature of Registered Agent

8/11/14
Date

If signing on behalf of an entity:

LEIGH C. KATZMAN, ESQ.
Typed or Printed Name

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