N07293

| (Requestor's Name) |
|---|
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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TO SEP 20 AN II: 31
SECRETARY OF STATE
MALLANASSEE, FLORIDY

SEP 2.1 2017 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations Brook Haven Condominium Association, Inc. Name of Corporation DOCUMENT NUMBER: N07293 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: Joshua Gerstin, Esq. Name of Contact Person Gerstin & Associates Firm/Company 40 S.E. 5th Street, Suite 610 Boca Raton, FL 33432 City/State and Zip Code lisa@gerstin.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lisa Kochlany Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address:

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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 char | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida. |
|---|---|
| 1. The name of the | ne corporation: Brook Haven Condominium Association, Inc. |
| 2. The principal of | office address: 1025 Casuarina Road, Unit 1, Delray Beach, FL 33483 |
| 3. The mailing ac | ddress (if different):1025 Casuarina Road, Unit 1, Delray Beach, FL 33483 |
| 4. Date of incorp | oration/qualification: 01/24/1985 Document number: N07293 |
| | street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned) |
| | Helena Fustead |
| | 1025 Casuarina Road, Unit 2 |
| | Delray Beach, FL 33483 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Gerstin & Associates | |
| | 40 S.E. 5th Street, Suite 610 |
| , | P.O. Box NOT acceptable Boca Raton, FL 33432 |
| The street address as changed will l | ss of its registered office and the street address of the business office of its registered agent, be identical. |
| | s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change. |
| Mul | 1 Am MARILO L BRANOVICH |
| - I further agree to - performance of i | the appointment as registered agent and agree to act in this capacity. BOARD PRESIDENT to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change. |
| | 09.18.2017 |
| _ | ature of Registered Agent Date |
| It signing on beh | |
| Joshua 1 | gerstn Eg |

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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