

*Missouri 421*

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

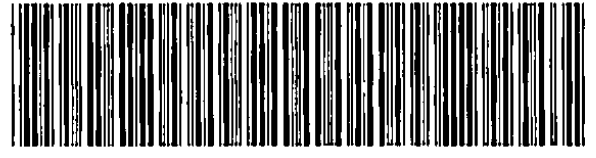
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

**FILED**

*flaichg*

R. WHITE  
OCT 25 2018

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FOUR SEASONS AT PARKLAND HOMEOWNERS ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N15000004309

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:

DANIEL WASSERSTEIN  
Name of Contact Person

WASSERSTEIN, P.A.  
Firm/Company

301 YAMATO ROAD, SUITE 2199  
Address

BOCA RATON, FL 33431  
City/State and Zip Code

danw@wassersteinpa.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANIEL WASSERSTEIN at ( 561 ) 288-3999  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
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**

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: FOUR SEASONS AT PARKLAND HOMEOWNERS ASSOCIATION, INC
2. The principal office address: 3601 QUANTUM BLVD., BOYNTON BEACH, FL 33426
3. The mailing address (if different): 6300 PARK OF COMMERCE BLVD., BOCA RATON, FL 33487
4. Date of incorporation/qualification: 4/28/2015 Document number: N15000004309
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)

STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON, P.A. c/o CHRISTIAN F. O'RYAN, ESQ

401 EAST JACKSON STREET, SUITE 2200

TAMPA, FL 33602

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

WASSERSTEIN, P.A.

301 YAMATO ROAD, SUITE 2199

P.O. Box NOT acceptable

BOCA RATON, FL 33431

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 or director

Thomas Carpenter, 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 of Registered Agent

9/28/2018

Date

If signing on behalf of an entity:

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 (03/12)

2018 OCT 18 PM 4: 58  
SECRETARY OF STATE  
TALLAHASSEE, FL

**FILED**