(Requestor's Name)	_
(Address)	
	_
(Address)	
	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	7
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COVER LETTER

TO: Amendment Section **Division of Corporations** Tamarac Gardens Condominium 6 Association, he Name of Corporation N25927 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: Lisa Barnett Name of Contact Person Castle Group Firm/Company 12270 SW 3rd Street, Suite 200 Address Plantation, FL 33325 City/State and Zip Code lbarnett@castlegroup.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: isa Barnett. 792-6000 ext. 2852 Name of Contact Person 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	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Tamarac Gardens Condominium & ASSOCIATION	N
2. The principal office address: 9835 68th Place Tamarac, FL 33321	
3. The mailing address (if different): C/o Castle Group	
12270 SW 3rd St, Suite 200 Plantation, FL 33325	·•·
4. Date of incorporation/qualification: 4/15/1988 Document number: N25927	
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)	
Katzman, Garfinkel, & Berger	
5297 W. Copans Road	
Margate, FL 33063	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Matthew Zifrony, Esq. c/o Tripp Scott	
110 SE 6th Street, Suite 1500	
P.O. Box NOT acceptable	*
Ft. Lauderdale, FL 33301	.*.
The street address of its registered office and the street address of the business office of its registered agents 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.	
Cleant Alvin Handin	
Signature of an officer or director 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.	
8/21/13	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
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
(P2F045 (03/12)