N28673 Requester's Name

CAMS 314 NE 3RD ST BOYNTON BEACH, FL 33435

CR2E031(7/97)

Office Use Only

Examiner's Initials (10

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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(Corporation Name)		.	(Document #)		
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NEW FILINGS		AN	<u>ENDMENTS</u>	-		<u>.</u>
☐ Profit			Amendment		-	V 10 SAME
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☐ Limited Liability			Change of Re			SECRETAFI VISION OF NOV 28
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☐ Other			Merger			3
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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,	
the undersigned corporation organized under the laws of the State of	
submits the following statement in order to change its registered office or registered agent, or both, in	
the State of Florida.	
1. The name of the corporation: Impressions at Boca Chase Home awners	
Association 9B, INC.	
2. The mailing address of the corporation: c/s CAMS 314 N.E. 3rd St.	
BOYNTON Beh, FL 33435	
3. Date of incorporation/qualification: 10/3/1988 Document number: N28673	
4. The name and address of the current registered agent and office:	
Myron Swatt	
6300 Pank of Commerce Bld.	
B P.+	ĸ
5. The name and address of the new registered agent (if changed) and/or registered office (if changed)	SE
(P. O. Box Not Acceptable)	X R
Nancy Ross, Esquire St. John, Core, Flore, Contin & Lenne, P.A.	<u>ح</u>
St. John, Core, Flore, Contin & Lenne, P.A.	F 83
300 HOSTVALIAN THE SO, SOLVE GOO	A
W. Palm Beach, FL 33401	
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.	
10-76-01	
(Signature of an officer, chairman or vice chairman of the board) (Date)	
Robert Jerry Miller President (Printed of typed name and title)	
Having been named as registered agent and to accept service of process for the above stated corporation, 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.	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity: Although a fine factor of the factor	
(Pyped or Printed Name) (Capacity)	

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