## N00000000 7653

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

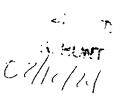




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02/12/24--01021--013 \*\*35.00





## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: La Cascade Condominium Association Name of Corporation			
DOCUMENT NUMBER: N00000007659			
The enclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this	s matter to the following:		
Bill Shields			
Name of Contact Person	1		
La Cascade Condominium Association, Inc.	• • • •		
Firm/Company	<del></del>		
615 Bayshore Drive	·		
Address	<del></del>		
Fort Lauderdale , FL 33304			
City/State and Zip Code			
billshields9@gmail.com			
E-mail address: (to be used for future annua	I report notification)		
For further information concerning this matter, p			
Bill Shields	at ( 302 ) 381-2864 Area Code & Daytime Telephone Numbe		
Name of Contact Person	Area Code & Daytime Telephone Numbe		
Enclosed is a \$35.00 check made payable to the	Department of State.		
Mailing Address: Amendment Section	Street Address: Amendment Section		
and the same of th			
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee		

Tallahassee, FL 32303

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chan	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statute nge is submitted for a corporation organized under the laws of the State of <mark>Florida</mark> r to change its registered office or registered agent, or both, in the State of Florida	
1. The name of the 2. The principal c	he corporation: La Cascade Condominium Association, Inc.  office address: 615 Bayshore Drive; Fort Lauderdale, FL 33304	
3. The mailing ad	ddress (if different):	
4. Date of incorpo	oration/qualification: November 16, 2000 Document number: N00000007659	
	street address of the current registered agent and registered office on file with the ment of State; (If resigned, enter resigned)	
,	Wassterstein, P.A.	
-	301 Yamato Road, Ste 2199	1~3
1	Boca Raton, FL 33431	240.
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	
I	Kaye Bender Rembaum, PL	
-	1200 Park Central Blvd., South	<del></del>
-	P.O. Box NOT acceptable	w
1	Pompano Beach, FL 33064	
The street addres as changed will b	ss of its registered office and the street address of the business office of its regis be identical.	tered agent,
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an office e board, or the corporation has been notified in writing of the change.	r so
Signature	E of an other or director Bill Shire and this	Nahoz
Turther agree to of my duties, and locument is bein	The appointment as registered agent and agree to act in this capacity, of comply with the provisions of all statutes relative to the proper and complete of all statutes relative to the proper and complete of a lam familiar with and accept the obligation of my position as registered agency filed merely to reflect a change in the registered office address. Thereby completen notified in writing of this change.	performance t. Or, it this irm that the
XUV	$\sqrt{\frac{d}{7/24}}$	
Signa	ature of Registered Agent Date	_
Isigning on beh		
•	ped or Printed Name	

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

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