5483/5485 LEE	STREET			
LEHIGH ACRE	-			
Current Mai	ling Address:			
5483 LEE S	•			
FEI Number: 20-2354154			Certificate of Status Desired: No	
Name and A	Address of Current Registered Ag	gent:		
RICHARD, FAF 5483 LEE STRI LEHIGH ACRE				
The above name	d entity submits this statement for the purpose of	changing its registered office or regist	tered agent, or both, in the State of Fi	lorida.
SIGNATURE: RICHARD FARAH				
	E: RICHARD FARAH			04/24/2017
	E: RICHARD FARAH Electronic Signature of Registered Ager	nt		04/24/2017 Date
Officer/Dire	Electronic Signature of Registered Agen	nt		
Officer/Dire	Electronic Signature of Registered Agen	nt Title	Р	
	Electronic Signature of Registered Ager		P FARAH, RICHARD	
Title	Electronic Signature of Registered Agen	Title		
Title Name Address	Electronic Signature of Registered Ager ctor Detail : V CRAWFORD, JOHN	Title Name	FARAH, RICHARD 5483 LEE STREET #7	
Title Name Address	Electronic Signature of Registered Ager ctor Detail : V CRAWFORD, JOHN 5483 LEE STREET #7	Title Name Address	FARAH, RICHARD 5483 LEE STREET #7	
Title Name Address City-State-Zip:	Electronic Signature of Registered Ager ctor Detail : V CRAWFORD, JOHN 5483 LEE STREET #7 LEHIGH ACRES FL 33971	Title Name Address	FARAH, RICHARD 5483 LEE STREET #7	
Title Name Address City-State-Zip: Title	Electronic Signature of Registered Ager ctor Detail : V CRAWFORD, JOHN 5483 LEE STREET #7 LEHIGH ACRES FL 33971 S	Title Name Address	FARAH, RICHARD 5483 LEE STREET #7	
Title Name Address City-State-Zip: Title Name	Electronic Signature of Registered Ager ctor Detail : V CRAWFORD, JOHN 5483 LEE STREET #7 LEHIGH ACRES FL 33971 S WILLIAMS, GRANT 5483 LEE STREET #7	Title Name Address	FARAH, RICHARD 5483 LEE STREET #7	

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD FARAH

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N04000004095

Entity Name: PALM ROYALE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

PRESIDENT

Date

FILED Apr 24, 2017 Secretary of State CC6208048843