706931

	questor's Name)	
(re	questors Marrie)	
	J\	
DA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
1	•	
	APR 28 202	7
	A, LUNT	-
_		

Office Use Only

300386426483

04/28/22--01017--030 **35.00

COVER LETTER

Amendment Section

TO:

Division of Corporations SUBJECT: VENETIAN PARK GARDENS ASSOCIATION, INC. Name of Corporation DOCUMENT NUMBER: 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: Michael E. Chapnick, Esquire Name of Contact Person Sachs Sax Caplan Firm/Company 6111 Broken Sound Parkway N.W., Suite 200 Address Boca Raton, FL 33487 City/State and Zip Code mchapnick@ssclawfirm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael E. Chapnick, Esq. Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: **Mailing Address:**

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida		
in orac	er to change its registered office or registered agent, or both, in the State of Florida.		
	the corporation: VENETIAN PARK GARDENS ASSOCIATION, INC.		
2. The principal	office address: c/o Benchmark Property Management, 7932 Wiles Road, Coral Springs, FL 33309		
3. The mailing a	nddress (if different):		
4. Date of incor	poration/qualification: 03/05/1964 Document number: 706931		
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
	KAYE BENDER REMBAUM, P.L.		
	1200 Park Central Boulevard, South		
	Pompano Beach, FL 33064		
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office		
	ASSOCIATED CORPORATE SERVICES, LLC		
	6111 Broken Sound Parkway N.W., Suite 200		
	P.O. Box. HOT acceptable		
	Boca Raton, FI, 33487		
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.		
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change.		
Jams.	W. Michay Priss W. McAVdy Priss Dec		
Thereby accept to further agree to of my duties, and document is being the contract of the con	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance if I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address. I hereby confirm that the been nutified in writing of this change.		
Sign	where of Registered Agent 12/2022		
If signing on bel			
Michael	E. Chapnick		

* * * 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 (04/13)