## 716337

(Requestor's Name)				
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PICK-UP WAIT MAIL				
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2024 DEC 13 MM II: 27 SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section		<b>^</b>			
Division of Corporations					
SUBJECT: GARDEN-AIRE VILLAGE	SEA HAVEN, INC				
Name of Corporation			<u> </u>		
DOCUMENT NUMBER: 716337		<u></u>		·•·	
The enclosed Statement of Change of I	Registered Office/Agent	t and fee a	e submitted fo	or filing.	
Please return all correspondence conce	rning this matter to the	following:			
Sara Di Lustro, LCAM					
Name of Contact Person					
N/A					
Firm/Company	,				
2731 NE 14th St. Cswy.				200 51	
Address				77 G	-
Pompano Beach, Fl. 33062				一位 5	
City/State and Zip Code				A 3	
manager@gavseah	aven.com			7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	;
E-mail address: (to be used for futu	re annual report notifi	cation)			:T
For further information concerning this	s matter, please call:			2024 DEC 13 MM 11: 27 SEGRETARY OF STATE SEGRETARY OF STATE	
Sara Di Lustro, LCAM	at ( <u></u>	)54	) 946-6259	elephone Number	
Name of Contact Perso	n 7	Area Code	& Daytime Te	elephone Number	

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 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 cha	nge is submitted for a corporation or	0502, 607,1508, or 617,1508, Florida Statutes, this ganized under the laws of the State of Florida gistered agent, or both, in the State of Florida.			
<ol> <li>The name of t</li> <li>The principal</li> </ol>	the corporation: GARDEN-AIRE VII. office address: 2731 NE 14th St. Csw	LAGE SEA HAVEN, INC y. Pompano Beach, FL 33062			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 4/9/1969	Document number: 716337			
	I street address of the current register timent of State: (If resigned, enter res	ed agent and registered office on file with the igned)			
	Becker & Poliakoff, P.A.	2			
	1 East Broward Blvd. Suite 1800 Ft Lauderdale, FL 33301  SECRET				
6. The name and (if changed):	I street address of the new registered	auderdale, FL 33301  SECRETARY OF STATE TALL AHAS SEE, FILE TARK OF STATE TO SEE THE SECOND SECO			
	Kaye Bender Rembaum	FFI 27			
	1200 Park Central Boulevard South  P.O. Box, NOT acceptable  Pompano Beach, Florida 33064				
		reet address of the business office of its registered agent			
Such change wa authorized by th	as authorized by resolution duly add ne hoard, or the corporation has bee	opted by its board of directors or by an officer so notified in writing of the change.			
Diane	r Fitzgerald	Diane Fitzgerald - Board President			
		Printed or typed name and title			
I further agree of my duties, ar document is bei	the appointment as registered agento comply with the provisions of all all I am familiar with and accept the ing filed merely to reflect a change is been notified in writing of this cha	statutes retative to the proper and complete performance obligation of my position as registered agent. Or, if the in the registered office address, I hereby confirm that the			
Lisa	A. Magill manure of Registered Agent	11/20/2024			
Sig	nature of Registered Agent	Date			
If signing on be	chalf of an entity:				
Diane Fitzgerald	1				
<u> </u>	yped or Printed Name				
	* * * FILIN(	7 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)