

717066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

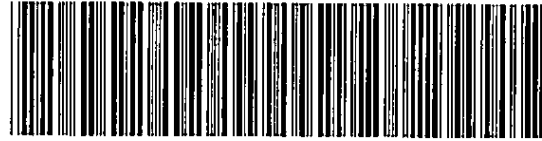
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

Reg Agent / Office Change

CH

**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, this  
statement of change is submitted for a corporation organized under the laws of the State of Florida  
\_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: The Royale Riviera Association, Inc.
2. The principal office address: 935 E Causeway Boulevard, Vero Beach, FL 32963
3. The mailing address (if different): c/o Elliott Merrill Comm Mgmt, 835 20th Place, Vero Beach, FL 32960
4. Date of incorporation/qualification: 08/27/1969 Document number: 717066
5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State: (If resigned, enter resigned)

Jay Steven Levine, Esquire

3300 PGA Boulevard, Suite 570

Palm Beach Gardens, FL 33410

6. The name and street address of the new registered agent (if changed) and /or registered office  
(if changed):

Florida Association Attorneys

11891 U.S. Highway 1 North #100

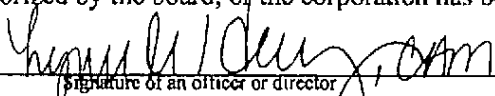
P.O. Box NOT acceptable

North Palm Beach, FL 33408

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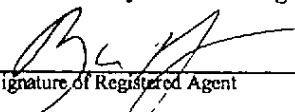
The street address of its registered office and the street address of the business office of its registered agent,  
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Lynn M. Hebert, Esq., CAM  
Printed or typed name and title

*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. Or, if this  
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the  
corporation has been notified in writing of this change.*

  
Signature of Registered Agent

4/12/21  
Date

If signing on behalf of an entity:

Brennan Grogan For Florida Association Attorneys  
Typed or Printed Name

\*\*\* 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)