

721769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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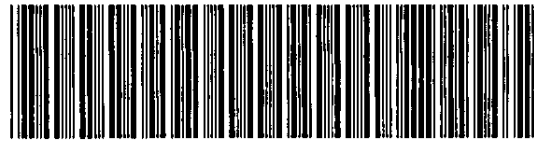
(Business Entity Name)

(Document Number)

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D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Condominium Association of Plaza Towers North Inc.
Name of Corporation

DOCUMENT NUMBER: 721769

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:

Rhonda Hollander Esq
Name of Contact Person

Rhonda Hollander P.A.
Firm/Company

314 S. Federal Highway
Address

Dania Beach, FL 33004
City/State and Zip Code

info @ plazatowersnorth.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Olga Barak at (954) 458 0488
Name of Contact Person Area Code & Daytime Telephone 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
18 APR 13 PM 12:26



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 12, 2018

PLAZA TOWER NORTH
1833 S OCEAN DRIVE
HALLANDALE BEACH, FL 33309

SUBJECT: CONDOMINIUM ASSOCIATION OF PLAZA TOWERS NORTH, INC.
Ref. Number: 721769

We have received your document for CONDOMINIUM ASSOCIATION OF PLAZA TOWERS NORTH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We received the attached check in our office with no supporting documents. If you wish to file something with our office please return the attached check with the proper application for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 518A00007434

**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: Condominium Association of Plaza Towers North
2. The principal office address: 1833 S. Ocean Drive
Hallandale FL 33009
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/27/1971 Document number: 721769

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)

Alicia Tahirovic
1833 S. Ocean Drive # 704
Hallandale FL 33009

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

Rhonda Hollander P.A.
314. S. Federal Highway
P.O. Box NOT acceptable
Dania Beach, FL 33004

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

ALICIA TAHIROVIC
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

April 10/18
Date

If signing on behalf of an entity:

RHONDA HOLLANDER, ESQ
Typed or Printed Name

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 APR 23 PM 2:24