722728

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Attorneys at Law



DONNA DiMAGGIO BERGER, ESQ. dberger@KGBlawfirm.com

January 9, 2014

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

> Re: Berkley South Condominium Association, Inc. Change of Registered Agent

Dear Sir / Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations which has been properly completed by this office. Furthermore, enclosed please find a check made payable to the Florida Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed above.

Sincerely,

KATZMAN GARFINKEL & BERGER

Donna DiMaggio Berger, Esquire

Founding Partner

DDB:dts Enclosures

cc: Joe Snell, Community Association Manager

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

statement of char	provisions of sections 607.0502, 617.0 nge is submitted for a corporation or to change its registered office or reg	ganized under the law	vs of the State of F	LORIDA	
1. The name of the	ne corporation: BERKLEY SO	UTH CONDOM	<u>INIUM ASS</u>	OCIATION, INC.	
	office address: 3015 N. OCEAN ERDALE, FL 33308	BLVD., MANAGE	MENT OFFICE	,	
3. The mailing ac	ddress (if different): SAME		 		
4. Date of incorp	oration/qualification: 02/21/19	Document r	number:	722728	
	street address of the current registers timent of State: (If resigned, enter resi		d office on file with	n the	
	BECKER & POLIAKOFF, P.A	٩			
	625 N. FLAGLER DR, 7TH F	LOOR		The second secon	
	WEST PALM BEACH, FL 33	3401			
6. The name and (if changed):	street address of the new registered a		d /or registered offi		
				(2)	
	5297 WEST COPANS ROAD P.O. Box NOT acceptable				
	MARGATE, FLORIDA 33063	•			
The street addre	ss of its registered office and the str be identical.	reet address of the bu	usiness office of its	s registered agent,	
Such change wa	as authorized by resolution duly add the board, of the corporation has bee	pted by its board of	directors or by an	officer so	
Signatur	ullylin	E/ke	ON Menha ed or typed name and til	ne , fresdent	
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agen to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change to been notified in writing of this cha	t and agree to act in statutes relative to th obligation of my po- in the registered offic nge.	this capacity. he proper and com sition as registere ce address, I hereb	plete performance dagent. Or, if this by confirm that the	
Sig	nature of Registered Agent	,	Date	<u>/</u>	
If signing on be	half of an entity:				
	MAGGIO BERGER, ESQ.				

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