723227

(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:						

Office Use Only



300401695073

02/10/23--01009--010 **35.00

2023 FEB 10 PM u: 2J

COVER LETTER

TO: Amendment Section Division of Corporations LEISUREVILLE LAKE UNIT N CONDOMINIUM ASSOCIATION, INC. Name of Corporation 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: DANIEL WASSERSTEIN WASSERSTEIN, P.A. Firm/Company 301 YAMATO ROAD, SUITE 2199 **BOCA RATON, FL 33431** City/State and Zip Code danw@wassersteinpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DANIEL WASSERSTEIN 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, ange is submitted for a corporation or to change its registered office of	on organized under the laws	of the State of FLOR	IDA	
	the corporation: LEISUREVILI	-			NC.
1. The name of	office address: 1802 OCEA	N DRIVE #113. BOY	NTON BEACH,	FL 33242	
2. The principal	office address:				
3. The mailing a	address (if different): N/A				
4. Date of incor	poration/qualification: 4/21/19	972 Document nur	nber: 723227	-	
5. The name and	d street address of the current reg rtment of State: (If resigned, ente	gistered agent and registered of	office on file with the		-
	BARBAHA KACZMAR	CZYK			
	1802 OCEAN DRIVE	# 113			
	BOYNTON BEACH, F	L 33426			
6. The name and (if changed):	d street address of the new regist	ered agent (if changed) and /o	or registered office	2023 FEB	!
	WASSERSTEIN, P.A.		•	8	•
	301 YAMATO ROAD,	SUITE 2199		O P	
). Box NOT acceptable		Pii ų:	ند.
	BOCA RATON, FL 334	1 31	·	7: 2:	
The street address changed will	ess of its registered office and the identical.	ne street address of the busin	ess office of its regi	stered agent,	
Such change wa authorized by the	as authorized by resolution duly he board, or the corporation has	adopted by its board of dire been notified in writing of the	ctors or by an office he change.	r so	
17 Cut Signate	agent T. Beck	MargoT Printed or	K Beck typed name and title	Presid	eut
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered a to comply with the provisions of my duties, and I am familiar wi is document is being filed mere that the corporation has been n	agent and agree to act in this fall statutes relative to the pith and accept the obligation by to reflect a change in the riotified in writing of this cha	s capacity. roper and complete of my position as re egistered office add nge.	gistered Fess, I	
$-\alpha v_{i}$	hattife of Registered Agent	1101/2020	Date		
If signing on bo	chalf of an entity:				
	ASSERSTEIN	_			
т	Smed or Printed Name				

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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