

725 638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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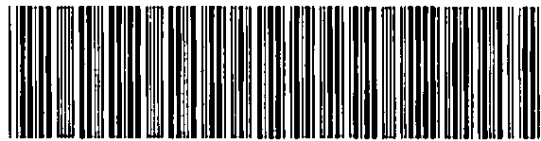
(Business Entity Name)

(Document Number)

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AUG 14 2017

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: APPLEGREEN CONDOMINIUM APARTMENTS, INC.  
Name of Corporation

DOCUMENT NUMBER: 725638

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:

Patrice Lawson  
Name of Contact Person

PeytonBolin, PL  
Firm/Company

3343 W. Commercial Blvd, Suite 100  
Address

Fort Lauderdale, FL 33309  
City/State and Zip Code

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

For further information concerning this matter, please call:

Patrice Lawson at ( 954 ) 3161339  
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

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: APPLGREEN CONDOMINIUM APARTMENTS, INC.
2. The principal office address: 2855 N. University Drive 310 Coral Springs, FL 33065
3. The mailing address (if different): P.O. BOX 9519 CORAL SPRINGS, FL 33075
4. Date of incorporation/qualification: 02/22/1973 Document number: 725638

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)

TUCKER & TIGHE, P.A.
800 E. BROWARD BLVD., SUITE 710
FORT LAUDERDALE, FL 33301

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

PeytonBolin, PL
3343 West Commercial Blvd, Suite 100
Fort Lauderdale, FL 33309

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TALLAHASSEE FL 0910

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: Abdul R. Satta
Printed or typed name and title: ABDUL R. SATTA - PRESIDENT

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: Patricia Lawson
Date: 8-2-17

If signing on behalf of an entity:
PeytonBolin, PL
Typed or Printed Name

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