

726211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

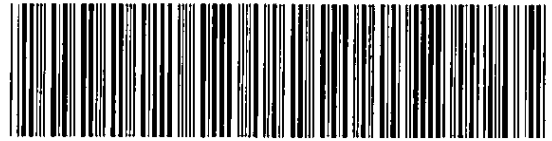
(Business Entity Name)

(Document Number)

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05/06/24

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CASTLE 12 CONDOMINIUM INC.
Name of Corporation

DOCUMENT NUMBER: 726211

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:

Taeja Sims
Name of Contact Person
Taejism LLC
Firm/Company
4164 Inverrary Dr. 701
Address
Lauderhill, FL 33319
City/State and Zip Code

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

2007
-5
MAY 24
CASTLE 12 CONDOMINIUM INC.

For further information concerning this matter, please call:

Taeja' Sims at (561) 806-4664
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Castle 12 Condominium Inc.,
- 2. The principal office address: ATTN: 4TH FLOOR OFFICE
4751 NW 21 ST LAUDERHILL, FL 33313
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 04/24/1973 Document number: 726211
- 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)

Basulto Robbins and Associates, L.L.P.
14160 NW 77 Court Ste. 22
Miami Lakes, FL 33016

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

Cheryl J. Levin, P.A.
COURTYARD BUSINESS CENTER
P.O. Box NOT acceptable
4694 NW 103rd Avenue Sunrise, Florida 33351

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 DIVISION OF CORPORATIONS
 FL
 JUN 13 5 AM '74

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.

Barbara Cady
 Signature of an officer or director

Barbara Cady - President
 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.

Cheryl J. Levin
 Signature of Registered Agent

Cheryl J. Levin
 Cheryl J. Levin
 Date 6/13/74

If signing on behalf of an entity:
Cheryl J. Levin
 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
 CR26045 (04/13)