## 728082

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

Office Use Only



700336449917

11/03/19--01002--019 \*\*39.00

R. WHITE DEC 07 2019 -8 FH 1:06

--/

Donna DiMaggio Berger, Esq. Shareholder Board Certified Specialist, Condominium and Planned Development Law

Phone: (954) 364-6031 Fax: (954) 985-4176

dberger@beckerlawyers.com

Becker & Poliakoff I East Broward Blvd. Suite 1800 Ft. Lauderdale, Florida 33301

November 1, 2019

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

Re: Emerald Isles West Condominium Association, Phase One, Inc.

Document No. 728082

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office/Agent form along with Check #001804 in the amount of \$35.00 made payable to the Florida Department of State to cover the cost of filing.

Should you have any questions, please do not hesitate to contact me. Thank you.

Very truly yours,

Donna DiMaggio Berger

For the Firm DDB2/og

Enclosures



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

statement of chai	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	he corporation: EMERALD ISLES WEST CONDOMINIUM ASSOCIATION, PHASE ONE, INC
2. The principal Davie, F	office address: 4850 SW 63rd Terrace
3. The mailing ac	eddress (if different): 9600 Griffin Road ER CITY, FL 33328
4. Date of incorp	poration/qualification: 11/15/1973 Document number: 728082
5. The name and	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	ELITE MANAGEMENT ASSOCIATES INC.
	9600 Griffin Road
	COOPER CITY, FL 33328
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	BECKER & POLIAKOFF, P.A.
	1 EAST BROWARD BOULEVARD STE 1800
	FORT LAUDERDALE, FL 33301
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Signatur	Te of an officer or director  ANTOINE FOUR EAND PRESIDENT  Printed or typed name and time
I further agree t performance of agent. Or, if thi	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change.
- ح	half of an entity:
Donna Dil	Maggio Berger  Apped 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 \* \* \*