728 259

•					
(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



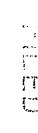
000274733620

07/13/15--01007--002 **35.00

C. CARROTRIES.

SEC LEGARY OF STATE

A 1 A 144 SEP ET DATE



5297 West Copans Road Margate, Florida 33063 T | 954.486.7774 F | 954.486.7782

Attorneys at Law



Mary Ann Chandler, Esq. MChandler@likeyourlawyer.com

July 9, 2015

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

Re: Lakewood on the Green Condominium 2 Association, Inc.

Change of Registered Agent

File No: 12681-001

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,

Mary Ann Chandler, Esquire

Partner

MAC:kmc Enclosures

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

statement of cha	nge is submitted for a co	prporation organize	507.1508, or 617.1508, Floric d under the laws of the State of d agent, or both, in the State o	of FLORIDA	-
1. The name of t	the corporation: <u>Lakev</u>	vood on the C	Green Condominium	2 Association	, Inc.
•			Management, 2945 W.	Cypress Creek	Road
	Fort Lauderdale, Fl				<u> </u>
3. The mailing a	nddress (if different): <u>SA</u>	NVIE.		- V- V	
4. Date of incorp	poration/qualification:	01/11/1974	Document number:	728259	
	d street address of the cur rtment of State: (If resign		nt and registered office on file	with the	
	Exclusive Property	Management		Pte de	20
2945 W. Cypress Creek Road, Suite 201					2015 JUL
	Fort Lauderdale, F	L 33309			
6. The name and (if changed):	office	3 PH 3:			
	KATZMAN GARFI	NKEL			Ž 2
	5297 WEST COP			بەر 	
	P.O. Box NOT acceptable				
	MARGATE, FLOR				
The street address changed will	ess of its registered office to the second control of the second c	ce and the street ad	dress of the business office	of its registered age	nt,
Such change was authorized by the	as authorized by resolut he board, or the corpora	ion duly adopted b tion has been notif	y its board of directors or by ied in writing of the change		·
Pair	Seawly tav		Paul Scar Pitt	- President	Ţ
I hereby accept I further agree of my duties, an document is be corporation has	the appointment as reg to comply with the prov ad I am familiar with an ing filed merely to refle s been notified in writin	istered agent and a isions of all statute d accept the obliga ct a change in the i g of this change.	agree to act in this capacity, is relative to the proper and ation of my position as regis registered office address, I h	complete performa tered agent. Or, if i tereby confirm that i	nce his he
		—	7/8/15		_
If signing on be	chalf of an entity:		Date		
LEIGH	H.C. KATZMAN, ES	Q		· .	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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