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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: ALPINE WOODS ASSOCIATION, INC. Name of Corporation		
DOCUMENT NUMBER: 728290		
The enclosed Statement of Change of Registered Offi	ce/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Arthur E. Lewis, Esq.		
Name of Contact Person		
Backer, Aboud, Poliakoff & Foelster		
Firm/Company		
400 S. Dixie Highway, Suite 420		
Address		
Boca Raton, FL 33432		
City/State and Zip Code		
alewis@bapflaw.com		
E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this matter, please	e call:	
Arthur E. Lewis, Esq.	at (561) 361-8535 Area Code & Daytime Telephone Number	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depa	artment of State.	
Mailing Address: Amendment Section	Street Address:	
	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 6 Inge is submitted for a corporation organized The change its registered office or registered	d under the laws of the State of	
	he corporation: ALPINE WOODS ASSOCIA		
1. The name of t	ne corporation:	OR, Davie, FL 33328	
3. The mailing a	ddress (if different): C/O Miami Mgmt., 114:	Sawgrass Corporate Parkway, Sunrise,	FL 33323
4. Date of incorp	poration/qualification: 01/14/19/4	Document number:	
5. The name and	I street address of the current registered ages tment of State: (If resigned, enter resigned)	nt and registered office on file with the	
	Arthur Lewis		202 24:
	800 Corporate Drive, #500		2022 SE
	Fort Lauderdale, FL 33334		'~t
6. The name and (if changed):	i street address of the new registered agent (if changed) and /or registered office	Z PR 30 III
	Arthur E. Lewis, Esq.		<u> </u>
	Backer, Aboud, Poliakoff & Foelster		
	P.O. Box N 400 S. Dixie Highway, Suite 420, Boca Rato	OT acceptable n. FL 33432	
The street address changed will Such change was authorized by	ess of its registered office and the street ad be-identical as authorized by resolution duly adopted be the board, of the corporation has been notifi-	dress of the business office of its regi	stered agent, er so
XIMI	16 / //	Kim Marie Gugliuzza, President	
I hereby accept I footbar agree	to it is office of director the appointment as registered agent and to comply with the provisions of all statute all ambamiliar with and accept the obliging filed murely to reflect a change in the sheen notified in writing of this change.	agree to act in this capacity. es relative to the proper and complete ation of my position as registered age registered office address, I hereby con	
(24)	4	September 15 2022	
SI	gnature of Registered Agent	Date /	
If signing on b	ehalf of an entity:		
	Typed or Printed Name	· ¢35 00 * * *	

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