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(Requestor's Name)	
(Address)	
(100,000)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
	ı
(Business Entity Name)	
(Document Number)	
,	
Certified Copies Certificates of Statu	ıs
Special Instructions to Filing Officer:	
Special instructions to Filling Officer.	
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Office Use Only



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R. WHITE DEC 18 2019 20191. 120 Fill2: 02



December 3, 2019

PALM AIRE COUNTRY CLUB NO. 5 C/O EXCLUSIVE PROPERTY MGMT 2945 W CYPRESS CREEK RD #201 FT LAUDERDALE, FL 33309

SUBJECT: PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION NO.

5, INC.

Ref. Number: 728860

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 819A00024452

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Division of the control of the contr

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: PALM-AIRE COUNTRY CLUB CONDO	MINIUM ASSOCIATION NO. 5, INC.
Name of	Corporation
DOCUMENT NUMBER: 728860	
The enclosed Statement of Change of Registered Off	ice/Agent and for any l
Please return all correspondence concerning this matt	er to the following:
Samuel Landol, E	
	ontact Person
Landol Law Firm,	
	ompany
2101 NW Corporate	Blvd., Suite 410
Add	
Boca Raton, FL 3	
City/State an	
Sam@Landol-Law	.com
E-mail address: (to be used for fu	iture annual report notification)
For further information concerning this matter, please concerning this matter, please concerning this matter.	ali:
Sam Landol	at (954)406-2936 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Davrime Telephone Number
Enclosed is a \$35.00 check made payable to the Departm	
•	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building
Tallahassce, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

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 as	
in order to change its registered office or registered agent, or both, in the State of Florida. PALMARE COUNTRY CLASS OF BOTH AND PROPERTY OF THE PROPERTY OF	
1. The name of the corporation: PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION NO. 5, II	NC.
2. The principal office address: C/O EXCLUSIVE PROPERTY MANAGEMENT 2945 WEST CYPRESS CREEK DR. C. H. 2014	
2945 WEST CYPRESS CREEK RD Suite 201, FT. LAUDERDALE, FL 3	3309
3. The mailing address (if different):	<u> </u>
4. Date of incorporation/qualification: 2/18/1974 Document number: 728860	
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)	
KRAVIT LAW, PA	2019
1801 SOUTH MILITARY ROAD, Suite 120	∵ :
Boca Raton, FL 33431	20
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Landol Law Firm, PA	FH 12: 01
2101 NW Corporate Blvd., Suite 410	
P.O Hox NOT acceptable	
Boca Raton, FL 33431	
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 Printed or typed name and tille	
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 europeanton has been notified in writing of this change. Signature of legislated Ayen.	
f signing on behalf of an entity: Typed or Primed 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

CR2E045 (03/12)