## 7293210

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Pompano Beach Club North Association, Inc.
Name of Corporation
DOCUMENT NUMBER: 729326
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:
Melissa Garcia
Name of Contact Person
Gursky Ragan, PA
Firm/Company
2 S Biscayne Blvd, Suite 3570
Address
Miami Fl. 33131
City/State and Zip Code
jose.alfonso@fsresidential.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Melissa Garcia at (786 )369-8879
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

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Pompano Beach Club North Association, Inc.	
	office address: 101 Briny Ave, Pompano Beach, FL 33062	
	address (if different):	
4. Date of incorp	poration/qualification: 04/09/1974 Document number: 729326	
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Gursky Ragan, PA	
	141 NE 3rd Ave, Fifth Floor	
	Miami, FL 33132	
6. The name and (if changed):	Sursky Ragan, PA  2 S Biscayne Blvd, Suite 3570	
	2 S Biscayne Blvd, Suite 3570	7;
	P.U. BOX NUT incompany	T)
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.	
Signatur	re of an of the dryfector Printed or typed name and title	
I hereby accept I further agree t of my duties, an document is bein corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
	patture of Registered Agent  (0   23   23   1   1   1   1   1   1   1   1   1	
Darrie	half of an entity:	
,	* 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 (04/13)