729605

(Re	questor's Name)	
(Add	dress)	···-
(Àda	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
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SECRETARY OF STATE

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FEB 1 4 2022 I ALBRITTON

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: Ocean Pines Condominium Association, Inc.	
	office address: 3009 S. Ocean Blvd	_
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 05/07/1974 Document number: 729605	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	De Stefano, Robert	
	3009 S. Ocean B1 #706	
	Highland Bch, FL 33487	•
6. The name and (if changed):	Highland Bch, FL 33487 d street address of the new registered agent (if changed) and /or registered office HANAS	(
	Becker & Poliakoff, P.A. c/o Marty Platts, Esq.	
	625 N. Flagler Drive, 7th Floor	ı
	P.O. Box NOT acceptable West Palm Beach, FL 33401	
The street address changed will	ess of its registered office and the street address of the business office of its registered ageing be identical.	nt,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
John J. State	re of an office or director Printed or typed name and title	_
l hereby accept I further agree t of my duties, an document is bei	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 performant law familiar with and accept the obligation of my position as registered agent. Or, if the filed merely to reflect a change in the registered office address, I hereby confirm that the sheet notified in writing of this change. The provided Hereby Confirm that the property of the pr	ıce his he
If signing on be	half of an entity:	
ALLAN LE	EVIN yped or Printed Name	

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

BECKER & POLIAKOFF, P.A.

625 N. Flagler Drive,7th Floor West Palm Beach. FL 33401 (561) 655-5444

REGISTERED AGENT

The Firm will serve as Registered Agent for the Association, at the Association's request, for the purpose of accepting service of process should litigation be filed against the Association. The Firm will agree to serve as Registered Agent for the Association for a one-time fee of \$100.00. This fee will be used to cover our administrative expenses as well as to provide funds for purposes of resigning as Registered Agent should same become necessary. The Secretary of State currently charges a fee of \$87.50 for said purpose, which is already included in the one-time fee to the Firm. This fee does not include any legal services. Legal fees, if any, will be billed in accordance with the terms and conditions of the Retainer Agreement.

Ocean Pines Condominium Association, Inc. (Association) hereby elects to have Becker & Poliakoff, P.A. serve as its/Registered Agent.

Bv⁻

Title