## 730533

(Re	equestor's Name)	
(Ad	ldress)	<del> </del>
(Ad	(dress)	
`	,	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
<u></u>		
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,		

Office Use Only



800008583268



11/01/02--01084--003

RA Chg.

TO: Amendment Section

## TRANSMITTAL LETTER

Division of Corporations		.#
SUBJECT: Wellety	ondominium Name of corporation	
DOCUMENT NUMBER: 730	533	=
The enclosed Statement of Change of	Registered Office/Ager	nt and fee are submitted for filing
Please return all correspondence conc	erning this matter to the	e following:
Shannon RIVERA (Name of person	-	- ·
Moenix Memi SEK (Name of firm/comp	any)	· · · · · · · · · · · · · · · · · · ·
4780 N ST RO D. (Address)	Suite Ea50	다. 프
` ,		
LAUDERDALE LAKES, F	7 33319 ode)	· <del>-</del>
For further information concerning th	is matter, please call:	r Br
Shannon RIVERA (Name of person)	at (954)	& daytime telephone number)
(Name of person)	(Area eath)	or daydine reseptione number)
Enclosed is a \$35.00 check made payer	able to the Department	of State.
Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporation	- <b>S</b>
	409 E. Gaines Street Tallahassee, FL 32399	

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
<u>Floriof</u> in order to change its registered office or registered agent, or both, in the State
of Florida.  1. The name of the corporation: WELLEDY CONDMINIUM ASSOC, ATION
2. The principal office address:
3. The mailing address (if different): 4780 N ST ROF, SUITE E350
LAUDERDALE LAKES, FL 33319
4. Date of incorporation/qualification: 8 106 1974 Document number: 730533
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Michael Romm Phoenix Ment. Serv. Inc. 541 S. ST. RO 4. Suite 12
MARGATE R 33068
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed): Shannon RIVERA / Phoenix Mamt SERV. Inc.
4780 N. ST. RD 7, SUITE E250
LAUDERDALE CAKES, PC 33319
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, chantilan or vice chantilan of the board)  Segrature of an officer, chantilan or vice chantilan of the board)
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 equifirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent)  If signing on behalf of an entity:
(Capacity)