## 732134

(	(Requestor's Name)	
	(Address)	<u>-</u>
	(Address)	
	(City/State/Zip/Phone #	<u> </u>
`	(Only/Olato/Lipi/ (Iono //	•
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	<u> </u>
	,	
Certified Conies	Certificates of	Status
Special Instructions	to Filing Officer:	
	J. HOR <b>ne</b>	
l ,	MAR - 1 2022	
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		7/18 <u> </u>

Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

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2027 FEB 18 AM 8: 15

SECRETARY OF STATE TALLAHASSEE, FL

February 3, 2022

RACHEL E FRYDMAN 9825 MARINA BLVD UNIT 100 BOCA RATON, FL 33428 US

SUBJECT: BUILDING FOUR OF RACQUET CLUB APARTMENTS AT BONAVENTURE 7 CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 732134

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Jasmine N Horne Regulatory Specialist II

Letter Number: 422A00002785

## **COVER LETTER**

Division of Corporations
SUBJECT: Wilding Four of Recycot (lob Apartments of Bosquentia 7 Condominum Association, Inc. Name of Corporation
DOCUMENT NUMBER: 732134
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:
Rachel E. Frydman PA  Rachel E. Frydman PA  Firm/Company  9825 Maring Bouleverd # 100  Address  Boca Raton H 33/128  City/State and Zip Code  Fachel o Tachel Frydman law, com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:    Reach of E. Trydman   at (954) 22) - 39/6   Name of Contact Person   Area Code & Daytime Telephone Number
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

TO:

Amendment Section

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flor hange is submitted for a corporation organized under the laws of the State	e of	<b></b>	
in ord	ler to change its registered office or registered agent, or both, in the State	e of Florida.		
1. The name of	of the corporation: But ident Four of Receiver clab Agreed of Receiver clab Agreed of Association Time.  Continuous Association Time.  Sold office address: Cla Montanta Disperse Security.  21 100 Randy Suite 355 Concil Springs.	mental item	K (41-77)	<u>(314</u> .)
2. The principa	ornice address: Che 1990 Andre Was party Septim	<u></u>		
. <u>) 4 (2 ( )</u>	solves the same carel springs	M 3300	<u> </u>	
3. The mailing	address (if different):	<del></del>		
4. Date of incor	poration/qualification:Document number:	732134		<del></del>
<ol><li>The name an Florida Depa</li></ol>	d street address of the current registered agent and registered office on fil rument of State: (If resigned, enter resigned)	e with the		
	The Foylman Law Enop PLLC			
	Bur N. Dalozalty Dove			
	Com Spenger 7-4 33065	<del></del>		
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered	SECRETAL FALL AHAS	2022 FEB 18	7
	Poca Raton 71 33428		ÆH II: 3≀	
The street address changed will i	ss of its registered office and the street address of the business office of be identical.		ည at,	
Such change was authorized by the	s authorized by reconstitution duly adopted by its board of directors or by a board, of the change has been notified in writing of the change.  Finaled of typed name and	un officer so	_	
performance of nagent. Or, if this hereby confirm the	he appointment as registered agent and agree to act in this capacity, o comply with the provisions of all statutes relative to the proper and can any duties, and I am familiar with and accept the obligation of my position document is being filed merely to reflect a change in the registered off that the corporation has been notified in writing of this change.			
Signa If signing on beha	alf of an entity:			
Robert	EFOUNIN, EST.			
	* * * FILING FFF: \$25.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

If