

## 733839

(Requestor's Name)
(Nequestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FILED

Amendment Section Division of Corporations

## **COVER LETTER**

TO:

SUBJECT: Cape Royal Office Condominium Associ Name of Corporation	ation, INC
DOCUMENT NUMBER: 733839	
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this r	matter to the following:
Rachel DeCamp	
Name of Contact Person	<del></del>
Rocket Association Management	
Firm/Company	
1980 N Atlantic Ave Unit 523	
Address	<del></del>
Cocoa Beach Fl. 32931	
City/State and Zip Code	<del></del>
rocketbrevard@gmail.com	
E-mail address: (to be used for future annual)	report notification)
For further information concerning this matter, ple	ease call:
Rachel DeCamp	at ( <sup>321</sup> ) <sup>4037155</sup> Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the D	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Talfahassee, FL 32314

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

statement of cha	mge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida S ation organized under the laws of the State of <u>F</u> e or registered agent, or both, in the State of F	lorida	his ———	_
1. The name of	the corporation. Cape Royal Of	fice Condominium Association, Inc			
		Ave Unit 523, Cocoa Beach Fl 32931			_ _
3. The mailing a	address (if different):				<u> </u>
4. Date of incor	poration/qualification:	Document number: 733839			
	d street address of the current r rtment of State: (If resigned, er	egistered agent and registered office on file with ter resigned)	th the		
	Space Coast Law				
	96 Willard St STE 203		S	207	
	Caran El 22022		ALE ALE	2024 NOV 14	77
6. The name and (if changed):	d street address of the new regi	istered agent (if changed) and /or registered off	SSØBV O ANKE	/ I 4 PM	
	Rocket Association Manageme		E.S.	ئن <del>ب</del>	O
	1980 N Atlantic Ave Unit 523		PAT	: 21	
	Cocoa Beach Fl 32931	P.O. Box NOT acceptable			
as changed will	l be identicăl.	the street address of the business office of its	_	_	nt,
Such change was authorized by	as authorized by resolution du he board, or the corporation h	lly adopted by its board of directors or by an east been notified in writing of the change.	officer so	3	
Print.		William M. Kehoe, Vice President			
-	1670 M officer or director	Printed or typed name and till			_
I hereby accept I further agree of my duties, ar document is be corporation by	the appointment as registered to comply with the provisions and I am familiar with and acceing filed merely to reflect a chis been notified in writing of the	d agent and agree to act in this capacity. of all statutes relative to the proper and come the obligation of my position as registered tange in the registered office address, I hereb is change.	plete per l agent, y confiri	rformai Or, if t n thát t	nce his he
Rachel	Delamp	Nov 8, 2024   7:15	AM PST		
Cecaocan	1499487 gnalure of Registered Agent	Date			_
If signing on be	chalf of an entity:				
Rachel DeCamp					
1	yped or Printed Name	<del></del>			

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