738091

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
1		

Office Use Only



000106902120

Ma Changl Juwis 08/01/07--01003--004 **35.00





Emerald Lake Corporate Park 3111 Stirling Road Fort Lauderdale, Florida 33312-6525 Phone: (954) 987-7550 Fax: (954) 985-4176 US Toll Free: (800) 432-7712

Mailing Address: P.O. Box 9057 Ft. Lauderdale, FL 33310-9057

ADMINISTRATIVE OFFICE

3111 STIRLING ROAD FORT LAUDERDALE, FL 33312 800.432.7712 U.S. TOLL FREE July 30, 2007

Reply To:

Direct dial: (954) 985-4184 LBurg@becker-poliakoff.com

WWW.BECKER-POLIAKOFF.COM BP@BECKER-POLIAKOFF.COM

> Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re:

Change of Registered Agent for Palm Springs II Condominium

Enclosed please find a CHANGE OF REGISTERED AGENT for the above-

referenced corporation, together with Check No. 160274 in the amount of \$35.00.

Kindly immediately make the appropriate change for this corporation and send

Association, Inc.

confirmation of same to the undersigned.

Your prompt attention in this matter is most appreciated.

Dear Sir or Madam:

FLORIDA OFFICES

BOCA RATON FORT MYERS

FORT WALTON BEACH

HOLLYWOOD

HOMESTEAD

LARGO

MELBOURNE *

MIAMI

NAPLES ORLANDO SARASOTA

TALLAHASSEE

WEST PALM BEACH

AFFILIATED OFFICES

BEHING

Frankfurt New York

PRAGUE

TEL AVIV

Very truly yours,

Lee H. Burg

For the Firm

LHB/wk Enclosure

FTL_DB: 1062669_1

* by appointment only

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

Pursuant to the provisions of sections 607.0502, 617. the undersigned corporation organized under the laws	
submits the following statement in order to change its	
the State of Florida.	
1. The name of the corporation: PALM St	PRINGS II CONDOMINIUM
ASSOCIATION, INC.	
2. The mailing address of the corporation: 1800	NW 80 AVE., MARGATE.
FL 33063	
3. Date of incorporation/qualification: 2-14-7	7 Document number:
4. The name and address of the current registered agent	and office:
DEVELOPMENT CONS	ULTANTS, INC.
2035 HARDING ST	4.0 10 11
HOLLYWOOD, FL 33	020
5. The name and address of the new registered agent (if (P. O. Box Not A	
BECKER + POLIAKOFF,	PA.
GARY A. POLIAROFF.	J.D. OE S
FT. LAUDERDALE,	
The street address of its registered office and the stree agent, as changed, will be identical.	t address of the business office of its registered
Such change was authorized by resolution duly adopte authorized by the board.	ed by its board of directors or by an officer so
Xamuel X ordon	7-25-07
(Signature of an officer, chairman or vice chairman of the boar	d) (Date)
Samuel Gordon Prosider (Printed or typed name and title)	<u></u>
Having been named as registered agent and to accept corporation, I hereby accept the appointment as regis I further agree to comply with the provisions of all staperformance of my duties, and am familiar with and registered agent.	service of process for the above stated tered agent and agree to act in this capacity. tutes relative to the proper and complete accept the obligation of my position as
	7–30–07
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	Progident
Gary A. Poliakoff, J.D. (Typed or Printed Name)	President (Capacity)
* * * FILING FEE	: \$35.00 * * *