## 739038

(Requestor's Name)	_
(Nequestors Ivalile)	
(Address)	
(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:	
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05/27/14--01004--024 \*\*35.00

JUN 12 2014 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Change of Registered Agent
Name of Corporation

**DOCUMENT NUMBER:** 

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:

David Klein

Name of Contact Person

Milberg Klein PL

Firm/Company

5550 Glades Road, Suite 500

Address

Boca Raton, FL 33431

City/State and Zip Code

Dklein@milbergkleinlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Klein

Name of Contact Person

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

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

	e provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Flor cange is submitted for a corporation organized under the laws of the State	•	
in orde	ler to change its registered office or registered agent, or both, in the State	e of Florida.	
1. The name of	the corporation: Newport "O" Condominium Associati	ion, Inc.	_
	al office address: 3501 West Drive		
Deerfield	ld Beach, FL 33442		_
3. The mailing a	address (if different):		_
4. Date of incor	rporation/qualification: Document number:		_
	nd street address of the current registered agent and registered office on fi artment of State: (If resigned, enter resigned)	ile with the	
	Condo Owners of Century Village		
	3501 West Drive		
	Deerfield Beach, FL 33442	<del></del>	
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registere:	ed office	
	Milberg Klein PL		
	5550 Glades Road, Suite 500		
	P.O. Box NOT acceptable Boca Raton, FL 33431		
The street addr as changed will	ress of its registered office and the street address of the business office ll be identical.	of its registered agent,	
Such change w authorized by t	vas authorized by resolution duly adopted by its board of directors or by the board, or the corporation has been notified in writing of the change.	y an officer so	
Sheet	la Summer SHEILA SIMP	~	1
I hereby accept I further agree performance of agent. Or, if th	ture of an officer or director  of the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and if my duties, and I am familiar with and accept the obligation of my possible discussions of the complete in the registered in that the corporation has been notified in writing of this change.	d complete; + 2 sition as registered.	1
	5.22.1		: #:
	gnature of Registered Agent Date	<u> </u>	į.
If signing on bo	chalf of an entity:	第6 2	
De-11	Typed or Printed Name		
•	- Than or a commentation		

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