139242

(Red	questor's Name)	
(Ada	iress)	
() loc	nessy	
(Address)		
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
	·	
Certified Copies	Certificates of Status	
	_	
Special Instructions to F	iling Officer:	

Office Use Only



200351756192

200351756192 09/09/20--01038--008 #35.00

2020 SEP -9 AM 9: 49

JQ 10/19/20

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

statement of che	er provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this englished for a corporation organized under the laws of the State of Florida eler to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Seville Area Condominium Association, Inc.	
2. The principal	l office address: 6300 Park of Commerce Blvd, Boca Raton Fl. 33487	
3. The mailing a	address (if different):	
4. Date of incorporation/qualification: 06/10/1977 Document number: 739242		
	d street address of the current registered agent and registered office on file with the runent of State: (If resigned, enter resigned)	
	Manning-Hudson, Laura M., Esq.	
	1655 Palm Beach Lakes Blvd., Suite C-500	
	West Palm Beach FL 33401	51
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	9
	Sachs Sax Caplan	
	Sachs Sax Caplan Sachs Sax Caplan 6111 Broken Sound Parkway NW. Suite 200	
	P.O Box NOT acceptable Boca Raton FL 33487	
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.	
	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	- [i
Signatur	DOJA LISA D'OFTE RESIDENT	: Seulle
•	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this applied merely to reflect a change in the registered office address. I hereby confirm that the been notified to writing of this change.	
F	Mode of Registered Agent 5/4/2020	
f signing on bel	half of an entity:	
Brett A. Duker, E	ësq.	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

Typed or Printed Name