## 740949

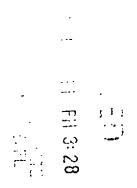
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## COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: Cypress Park Condominium Association, Inc. Name of Corporation 740949 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: Nataly Gutierrez, Esq. Name of Contact Person PeytonBolin PL Firm/Company 3343 W. Commercial Blvd, Suite 100 Address Fort Lauderdale, FL 33309 City/State and Zip Code Law@peytonbolin.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Christopher Swanson at 954 316-1339 ext. 1003

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section

Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Sta organized under the laws of the State of Flo registered agent, or both, in the State of Flo	orida
		ARK CONDOMINIUM ASSOCIA	
2. The principal	office address: 140 S. Cypres	s Rd. Pompano Beach, FL 3306	60
	address (if different): c/o TMG Prouderdale, FL 33309	perty Management 3303 W Commerc	ial Blvd, Suite 17
4. Date of incorp	poration/qualification: 12/05/19	Document number: 740949	
5. The name and		ered agent and registered office on file with	
	BOGEN, MICHAEL C/O	BOGEN LAW GROUP, P.A.	
	7351 Wiles Rd. Suite 202	2	
	CORAL SPRINGS, FL 33	3067	
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and for registered office	e
	3343 W. Commercial Blv	d, Suite 100	p .1.
	Fort Lauderdale, FI 33309	NOT acceptable	PH 3: 28
The street addreas changed will	ess of its registered office and the s l be identical.	street address of the business office of its r	egistered agent.
Such change wa authorized by th	as authorized by resolution duly adhe board, or the corporation has bee	opted by its board of directors or by an off en notified in writing of the change.	ficer so
Laurignan	ure of an officer or director	Elaine M. Simmons - Pro-	sident_
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered age to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been noti,	nt and agree to act in this capacity. I statutes relative to the proper and complo and accept the obligation of my position a o reflect a change in the registered office of fied in writing of this change.	
10%		6-7-2 1 Date	
, -	nature of Registered Agent	Date	
	chalf of an entity:		
Mouci 1	Youton.  'yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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