

742086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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@ 8/22/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SANDS POINT CONDOMINIUM IV, INC.
Name of Corporation

DOCUMENT NUMBER: 742086

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:

Lester Dupuis
Name of Contact Person

TDsunshine Property Management
Firm/Company

330 South State Rd. 7
Address

Plantation, Florida 33317
City/State and Zip Code

ldupuis@tdsunshine.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mel Berlin at (954) 721-0301
Name of Contact Person Area Code & Daytime Telephone Number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 11, 2011

LESTER DUPUIS
TDSUNSHINE PROPERTY MANAGEMENT
330 SOUTH STATE RD 7
PLANTATION, FL 33317

SUBJECT: SANDS POINT CONDOMINIUM IV, INC.
Ref. Number: 742086

We have received your document for SANDS POINT CONDOMINIUM IV, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name and capacity of the person signing on behalf of the new registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 411A00018836

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SANDS POINT CONDOMINIUM IV, INC.
2. The principal office address: 8361 Sands Point Blvd.
Tamarac, Florida 33321
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3-15-1978 Document number: 742086
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

WEINBERG, STEVEN A ESQ

7805 SW 6th CT.

PLANTATION FL. 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

TDsunshine Property Management, LLC

330 South State Road 7 Suite 500

P.O. Box NOT acceptable

Plantation, Florida 33317

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

MEL D. BERLIN, President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

7/16/11

Date

If signing on behalf of an entity:

Lester Dupuis

Typed or Printed Name

***** 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 (8/05)

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