743112

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SECRETARY OF STATE BIVISION OF CORPORATIONS

RAROCHS a USHI

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Burgundy A	association			
DOCUMENT NUMBER: 7431/2				
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
Patricia LaBero	ge Hartley, Esq.			
Name of Co	ntact Person			
Hartley & Morton, Atty. at Law				
	ompany			
800 Village Square	Crossing Suite 222			
Ado	iress			
Palm Beach Ga	rdens, Fl. 33410			
City/State a	nd Zip Code			
LRoman@thecontin	entalgroupinc.com			
E-mail address: (to be used for future annual report notification)				
•				
For further information concerning this matter, please	call:			
Linda Roman	at (561) 989-5020			
Name of Contact Person	at (561) 989-5020 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Depar	tment 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			
	2001 Divocation Control Choice			

CR2E045 (8/05)

1

Tallahassee, FL 32301

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

	2	12, 607.1308, or 617.1308, Florida Sta nized under the laws of the State of Flo	
in order to chang	ge its registered office or registe	ered agent, or both, in the State of Flor	rida.
•	ation: Burgundy A Asso	,	
2. The principal office add	dress: The Continental Gro		
	6300 Park of Comm	nerce Blvd Boca Raton, FL 334	87
3. The mailing address (if	different):		· · · · · · · · · · · · · · · · · · ·
4. Date of incorporation/q	ualification:06/02/1978	Document number:	743112
	dress of the current registered a State: (If resigned, enter resigne	gent and registered office on file with ted)	the
Hilley 8	& Wyant-Cortez, P.A.		
860 U.S	S. Highway 1 Suite 108		<u> -</u>
N. Palr	n Beach, FL 33408 US		WISION OF CO
6. The name and street add (if changed):	lress of the new registered ager	nt (if changed) and /or registered office	7
Hartley	& Morton, Attorneys at L	aw, P.A.	- - 5
800 Vil	lage Square Crossing Su		1
Dolm D	P.O. Box NO		
	each Gardens, FL 33410		
The street address of its r as changed will be identiced	egistered office and the street cal.	address of the business office of its r	egistered agent,
Such change was authorized by the board,	zed by resolution duly adopted or the corporation has been no	d by its board of directors or by an of otified in writing of the change.	ficer so
Signature of an office	er or director	Printed or typed name and title	
I hereby accept the appoi I further agree to comply of my duties, and I am far document is being filed m corporation has been not	ntment as registered agent an with the provisions of all stat miliar with and accept the obl verely to reflect a change in th ified in writing of this change	nd agree to act in this capacity. utes relative to the proper and compl igation of my position as registered a e registered office address, I hereby	ete performance igent. Or, if this confirm that the
Partitude Signature of Reg	L. Mutty	G-06-11 Date	
If signing on behalf of an	entity:		,
Patricia LaBe			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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