

746de2

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

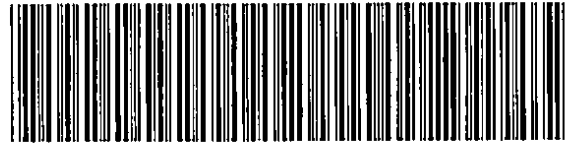
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
JUL 26 2023

Office Use Only



200409223852

05/25/23--01006--017 **\$5.00

2023 JUL 26
SECURITY
TALLAHASSEE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAPRI B ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: 746642

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:

Claudiu Cernat, Manager

Name of Contact Person

Phoenix Management Services Inc.

Firm/Company

6131 B Lake Worth Rd

Address

Greenacres, FL 33463

City/State and Zip Code

claudiu@phoenixfla.com

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

For further information concerning this matter, please call:

Claudiu Cernat

Name of Contact Person

at (561) 906.7723

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

**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: CAPRI B ASSOCIATION, INC.
2. The principal office address: c/o Phoenix Management Services Inc., 6131B Lake Worth Rd.
Greenacres, FL 33463
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/5/1979 Document number: 746642

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)

Siegfried, Rivera, Hyman, Lerner, De La Torre, Mars & Sobel PA
201 Alhambra Circle, Eleventh Floor
Coral Gables, FL 33134

2023 MAR 14
SECRET
TALLAHASSEE

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

SKRLD, INC.
201 Alhambra Circle, 11th Floor
Coral Gables, FL 33134

P.O. Box NOT acceptable

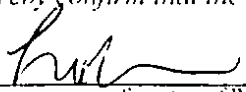
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

James Cook Pres.
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

3/19/23
Date

If signing on behalf of an entity:

Lisa A. Lerner
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 (03/12)

SIEGFRIED RIVERA

Laura M. Manning-Hudson
lmanning@siegfriedrivera.com

May 19, 2023

Sent Via U.S. Mail

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Capri B Association, Inc. ("Association")

Dear Sir/Madam:

Enclosed please find the "Statement of Change of Registered Office or Registered Agent or Both for Corporations" for the above-referenced Association, along with the Association's check number 1105 in the amount of \$35.00 for the filing of same.

Kindly return a copy of the filed Certificate to us in the enclosed, self-addressed envelope. Thank you for your assistance with this matter.

Sincerely,

SIEGFRIED RIVERA



Laura Manning-Hudson, Esq.

LMM/lj
Enclosures

H:\LIBRARY\CASES\6732\2130209\44T2997.DOC