

746963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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T. ROBERTS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NORMANDY S ASSOCIATION, INC.

Name of Corporation

DOCUMENT NUMBER: 746963

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:

LAURA MANNING-HUDSON, ESQ.

Name of Contact Person

SIEGFRIED RIVERA LERNER, ETC

Firm/Company

1675 PALM BEACH LAKES BLVD. #500

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

lmanning@siegfriedlaw.com

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

For further information concerning this matter, please call:

LAURA MANNING-HUDSON at 561 296-5444

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

**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: Normandy S Association, Inc.
2. The principal office address: c/o The Continental Group, 6300 Park of Commerce Blvd.,
Boca Raton, Florida 33487
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/27/1979 Document number: 746963
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)

Danny L. Wilson

4273 West Atlantic Avenue, Suite A-19

Delray Beach, Florida 33445

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

SKRLD, INC.

201 Alhambra Circle, # 1102

P.O. Box NOT acceptable

Coral Gables, Florida 33134

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.

Horty Singer
Signature of an officer or director

7/28/12
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.

Helio De La Torre
Signature of Registered Agent

7/28/12
Date

If signing on behalf of an entity:

Helio De La Torre

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)

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SECRETARY OF STATE