748295

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly Ivalile)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200301063952

 $\tilde{L} \rightarrow \tilde{L}_{1} - \tilde{L}_{2} = -\tilde{L}_{2} = 0 \ , \qquad \qquad \star \epsilon = 0 \ . \label{eq:local_loc$

Cale!

COVER LETTER

TO: Amendment Section Division of Corporations

THE JUPITER DUNES PROPERTY OWNERS ASSOCIATION, INC.

Name of Corporation

DOCUMENT NUMBER: 748295

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:

RENEE RENUART

Name of Contact Person

WASSERSTEIN, P.A.

Firm/Company

301 YAMATO ROAD, SUITE 2199

Address

BOCA RATON, FL 33431

City/State and Zip Code

danw@wassersteinpa.com

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

For further information concerning this matter, please call:

RENEE RENUART

561 (288-3999

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

CR2E045 (03/12)

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

	0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this or ation organized under the laws of the State of FLORIDA	
	ffice or registered agent, or both, in the State of Florida.	
1. The name of the corporation: THE JUP	TITER DUNES PROPERTY OWNERS ASSOCIATION, INC	
•	LTIME PROPERTY MANAGMENT OF SO FL, LLC,	
601 HERITAGE DRIVE, SUIT	E 145, JUPITER, FL 33458	
3. The mailing address (if different): N/A		
4. Date of incorporation/qualification: 7/3	1/1979 Document number: 748295	
5. The name and street address of the currer Florida Department of State: (If resigned	nt registered agent and registered office on file with the , enter resigned)	
BECKER & POLIA	KOFF, P.A.	
401 SE OSCEOLA	401 SE OSCEOLA STREET	
STUART, FL 34994	4	
6. The name and street address of the new r (if changed):	egistered agent (if changed) and /or registered office	
WASSERSTEIN, P	.A	
301 YAMATO ROA	AD, SUITE 2199	
	P.O. Box NOT acceptable	
BOCA RATON, FL	33431	
The street address of its registered office a as changed will be identical.	nd the street address of the business office of its registered agent,	
Such change was authorized by resolution authorized by the board, or the corporation	duly adopted by its board of directors or by an officer so that been notified in writing of the change.	
Signature of an officer or director	Steven SHAW Pros. POA	
performance of my duties, and I am familia	red agent and agree to act in this capacity, ns of all statutes relative to the proper and complete ar with and accept the obligation of my position as registered nerely to reflect a change in the registered office address, I een notified in writing of this change,	
Ville Villeat	7/5/2017	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
RENEE RENUART Typed or Printed Name		
ххх	FILING FEE: \$35.00 * * *	

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