

751336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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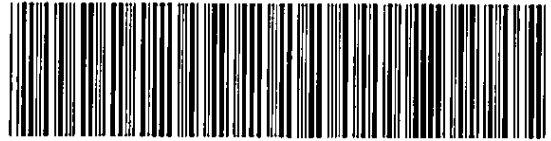
(Business Entity Name)

(Document Number)

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S. PRATHER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** OCEAN DUNES CONDOMINIUM ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** 751336

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:

Elaine M. Gatsos, Esquire

Name of Contact Person

Law Office of Elaine M. Gatsos

Firm/Company

5541 N University Drive, Suite 102

Address

Coral Springs, FL 33067

City/State and Zip Code

emgatsos@aol.com

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

For further information concerning this matter, please call:

Elaine M. Gatsos, Esquire

Name of Contact Person

at ( 561 )

750-1120

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: OCEAN DUNES CONDOMINIUM ASSOCIATION, INC.  
2. The principal office address: 3015 S. Ocean Boulevard, Highland Beach, FL 33487

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 05/27/2011 Document number: 751336

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)

KONYK & LEMME, PLLC

140 Intracoastal Pointe Drive, #310

Jupiter, FL 33477

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

ELAINE M. GATSOS, ESQUIRE / Law Office of Elaine M. Gatsos

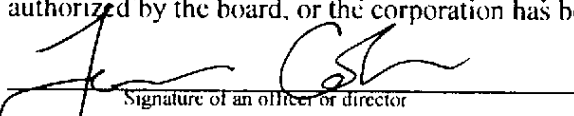
5541 N University Drive, Suite 102

P.O. Box NOT acceptable

Coral Springs, FL 33067

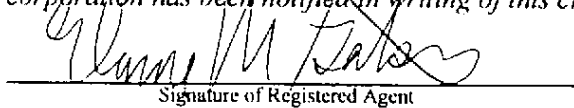
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Laurence Cohen - 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

6-5-24  
Date

If signing on behalf of an entity:

Elaine M. Gatos

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 (04/13)

2024 JUN 11 AM 9:46  
ALLIANCE, FLORIDA