754349

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Lisa A. Magill, Esq. Shareholder Phone: (954) 965-5053 Fax: (954) 985-4176 Imagill@bplegal.com

1 East Broward Blvd., Suite 1800 Ft. Lauderdale, Florida 33301

July 17, 2015

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

Re: Pompano Aegean Condominium Association, Inc. Document No. 754349

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office/Agent form along with Check #19827 in the amount of \$35.00 made payable to the Florida Department of State to cover the cost of filing.

Should you have any questions, please do not hesitate to contact me. Thank you.

Very truly yours,

Lisa A. Magill For the Firm

LAW/aw Enclosure

ACTIVE: 7359081_1

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

-		617.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of Florida		
in order to	o change its registered office o	r registered agent, or both, in the State of Florida.		
1. The name of the	corporation: POMPANO AE	GEAN CONDOMINIUM ASSOCIATION, INC.		
2. The principal of	fice address: 1010 South Ocea			
	Pompano Beach	, FL 33062		
3. The mailing add	ress (if different):			
4. Date of incorpor	ation/qualification: 09/25/198	Document number: 754349		
5. The name and st Florida Departm	reet address of the current regis ent of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	BARY A. POLIAKOFF, PRES	SIDENT		
	3111 Stirling Road		하	
<u>. </u>	Fort Lauderdale, FL 33312		15 JUL 21	OF OF
6. The name and state (if changed):	reet address of the new register	red agent (if changed) and /or registered office	AH	SURPERATION
В	ECKER & POLIAKOFF, P.A	k.	7: 59	Alto
_1	E. Broward Blvd., Suite 1800		w	7,
. F	ort Lauderdale, FL 33301	Box NOT acceptable		
_		street address of the business office of its registered ag	gent,	
Such change was a authorized by the b	uthorized by resolution duly a oard or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.		
Che	ule for	Charles A. Rollins, President		
Signature of		Printed or typed name and title		
I hereby accept the I further agree to c performance of my agent. Or, if this d hereby confirm tha	appointment as registered ag omply with the provisions of a duties, and I am familiar with ocument is being filed merely the corporation has been not	ent and agree to act in this capacity. Ill statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, l tifled in writing of this change.	,	
	PUA_	<u> </u>	_	
_	e of Registered Agent	Date		
If signing on behalf	of an entity:			
Typed	or Printed Name	· ·		

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