## 154349

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(Ad	ldress)			
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(Cit	ty/State/Zip/Phone i	#)		
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## **COVER LETTER**

Amendment Section

TO:

Division of Corporations				
SUBJECT: Pompano Aegean Condominium Association, Inc.				
Name of Corporation				
DOCUMENT NUMBER: 754349				
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:				
GAIL SHEAR  Name of Contact Person				
Name of Contact Person				
POMPANO ARGEAN CONDOMINIUM ASSOC, INC.				
1010 South Ocean Blvd				
Address				
Pompano Beach, Florida 33062				
City/State and Zip Code				
MAHAGER POMPANO - AEGEAN. Com E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
GAIL SHEAR at (954) 782-2600  Name of Contact Person Area Code & Daytime Telephone Number				
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  Street Address:  Amendment Section				

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of cha	mge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Flo n organized under the laws of the Sto r registered agent, or both, in the Sta	nte of
1. The name of	the corporation: Pompano Ae	gean Condominium Assoc	iation, Inc.
	office address: 1010 South C Beach, Florida 33062	Ocean Blvd	
3. The mailing a	address (if different):		
4. Date of incom	poration/qualification: 09/25/1	980 Document number: 75	54349
	d street address of the current regis rtment of State: (If resigned, enter	stered agent and registered office on resigned)	file with the
•	Becker & Poliakoff, P.A.	•	-
	1 East Broward Blvd Su	ite 1800	TALE TALE
	Fort Lauderdale, Florida	33301	
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registe	PILE PH 4: 22  2016 JAN 19 PH 4: 22  red office SEE FLURIDE
	Kaye Bender Rembaum	n, P.L.	
	1200 Park Central Blvd		- A
	Pompano Beach, Florid	Box NOT acceptable a 33064	
	ess of its registered office and the be identical.	street address of the business office	
Such change was authorized by the	as authorized by resolution duly a he board, or the corporation has b	adopted by its board of directors or leen notified in writing of the chang	oy an officer so e.
X Signati	In of an officer or director	x Charles Kull	142 Tresident
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered as to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been no	gent and agree to act in this capacit all statutes relative to the proper an h and accept the obligation of my po to reflect a change in the registered tified in writing of this change.	y d complete sition as registered d office address, I
Sig	SAN	12/04/15 Date	
_	chalf of an entity:	Date	
Lisa A. Mag	gill	·	
Т	yped or Printed Name	_	

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