755387

(Requestor's Name)			
(Address)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:

Name of Corporation

DOCUMENT NUMBER: 755387

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:

DANIEL WASSERSTEIN

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:

DANIEL WASSERSTEIN

561 (288-3999

Name of Contact Person

Area Code & Daytime Telephone Number

MI OCT 15 MILL 20

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

		7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of FLORIDA	
in orde	er to change its registered office or r	egistered agent, or both, in the State of Florida.	
1. The name of	the corporation: SUMMERTREE VILLA	AGE AT THE CALIFORNIA CLUB CONDOMINIUM ASSOCIATION, I	1(
		RY ROAD, MIAMI, FL 33179	
3. The mailing a	address (if different): C/O ASSO	CIATION SPECIALTY GROUP, LLC,	
9050 P	INES BLVD., STE 480, PE	MBROKE PINES, FL 33024	
4. Date of incor	poration/qualification: 12/5/1980	O Document number: 755387	
	d street address of the current registe atment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)	
	LAW OFFICES OF BRAD	DLEY FRIEDMAN, P.A.	
	10800 BISCAYNE BLVD	., STE 988	J
	MIAMI, FL 33161	<u> </u>	
6. The name and (if changed):		d agent (if changed) and /or registered office	
	WASSERSTEIN, P.A.	IITE 2199	į
	301 YAMATO ROAD, SU	JITE 2199	•
		or not acceptable	
	BOCA RATON, FL 33431	1	
The street address changed will	ess of its registered office and the s I be identical.	treet address of the business office of its registered agent,	
Such change was	authorized by resolution duly addite to bard, or the corporation has been	opted by its board of directors or by an officer so en notified in writing of the change.	
Signatu	ure of anothicer of director	Printed or typed name and title	
I hereby accept I further agree performance of agent. Or if th	t the appointment as registered age, to comply with the provisions of all f my duties, and I am familiar with e	nt and agree to act in this capacity. I statutes relative to the proper and complete and accept the obligation of my position as registered o reflect a change in the registered office address. I	
<u> </u>	WARRY	9/28/2018	
	gnature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
	ASSERSTEIN		
1	Typed or Printed Name		

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