## 756108

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Concord Village Condumnium IX Association Inc.
DOCUMENT NUMBER: 756/08
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:
Rachel E. Frydman Name of Contact Person
Rachel E. Frydman PA
9825 Marina Boulevard # 100
Boca Raton FL 33428 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Conject Person at (954) 227-3916  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

TO:



March 14, 2023

RACHEL E FRYDMAN 9825 MARINA BOULEVARD #100 BOCA RATON, FL 33428

SUBJECT: CONCORD VILLAGE CONDOMINIUM IX ASSOCIATION, INC.

Ref. Number: 756108

We have received your document for CONCORD VILLAGE CONDOMINIUM IX ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 823A00005948

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

Pursuant to the provisions of sections 607 0502 617 0502	
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.	
1. The name of the corporation: Concord Village Conduction	
2. The principal office address: 8150 West McNaw Rund of 351	_ <del></del>
THE TOUR KIND OF ACT	<del></del>
3. The mailing address (if differently)	
3. The mailing address (if different): Same	
4. Date of incorporation/qualification: 1/29/1981 Document number: 756 10-8	
5. The name and street add	
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)	
Valor 0	
Valancy + Reed, P.A.	
310 SE 13th Stoot	<del>,</del> ,
Et :	L
Ft. Lauderdele, FL 33316	
6. The name and street address of the new registered agent (if change)	
(II Changed).	<del>ر</del> -
$Q_{-}$	
Rachel E. Frydman, PA	
9825 May 2	
P.O. Box NOT screptable:	
Doca Raton PL 33428	
· · · · · · · · · · · · · · · · · · ·	
The street address of its registered office and the street address of the business office of its registered agent, Such change was authorized by resolution data.	
Such change was authorized by resolution duling	,
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.	
I hereby accept the formation of director Printed or typed name and title	
I hereby accept the appointment as registered	
performance of my duties, and I am familiar with a statutes relative to the proper and	
performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this abcument 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.  With and accept the obligation of my position as registered hereby confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agent 5 24 30 33	
If signing on behalf of an entity:	
Raine Frydman 856.	
Typed or Printed Name	

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