## 756406

| (Re                     | questor's Name)   |             |
|-------------------------|-------------------|-------------|
| (Ad                     | dress)            |             |
| (Ad                     | dress)            |             |
| (Cit                    | y/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | me)         |
| (Do                     | cument Number)    |             |
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

| SUBJECT: Southbridge Condominium Association, Inc. Name of Corporation | ,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>  |
|--|--|
| DOCUMENT NUMBER: 756406  |  |
| The enclosed Statement of Change of Registered Office/Agent a          | nd fee are submitted for filing.               |
| Please return all correspondence concerning this matter to the fo      | · ·  |
| <del>-</del>   |  |
| Scott J. Lee, Esq.   |  |
| Name of Contact Person   | -  |
| SJW Law Group, PLLC  |  |
| Firm/Company   | _  |
| 12300 South Shore Boulevard, Suite 202                                 |  |
| Address  | _  |
| Wellington, Florida 33414  |  |
| City/State and Zip Code  | _  |
| Scott@sjwlawgroup.com  |  |
| E-mail address: (to be used for future annual report notifica          | ition)   |
|  | - ,  |
| For further information concerning this matter, please call:           |  |
| Scott J. Lee, Esq.   | <b>√340-4555</b>                               |
| Name of Contact Person Are   | 340-4555<br>ea 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

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

|   | of the corporation: Southbridge Condomini  | an Association, Itic.   |                  |
|---|--|---|------------------|
| 2. The princip  | oal office address: 2950 Jog Road, Greenacro   | <del></del>   | <u> </u>         |
| 3. The mailing  | g address (if different): SAME   |   | _                |
| 4. Date of inc  | orporation/qualification: 01/14/1987   | Document number: N18748   | · <u> </u>       |
| 5. The name a<br>Florida Dep  | and street address of the current registered partment of State: (If resigned, enter resign | agent and registered office on file with the ned)   |                  |
|   | Wyant-Cortez & Cortez, Chartered   | 1 × × × × × × × × × × × × × × × × × × ×   | ,                |
|   | 840 US Highway One, Suite 345  | LLAT  | • -<br>= .       |
|   | North Palm Beach, Florida 33408  | ASS   | י<br>אל          |
| 6. The name a<br>(if changed  | and street address of the new registered ago   | ent (if changed) and /or registered office  | PH 2:            |
|   | Scott J. Lee, Esq. or SJW Law Group, PL  |   | 1                |
|   | 12300 South Shore Boulevard, Suite 202   | ,   |                  |
|   |  | ox NOT acceptable   |                  |
|   | Wellington, Florida 33414  |   |                  |
| The street add<br>as changed w                                      | tress of its registered office and the street<br>ill be identical.                         | t address of the business office of its registered ager   | nt,              |
| Such change vauthorized by  | was authorized by resolution duly adopte<br>the board, or the corporation has been no      | ed by its board of directors or by an officer so otified in writing of the change.                              |                  |
| ALK DON   | Cipocehlheimer   | M R Dahlheimer  | _                |
| I hereby acce<br>I further agre<br>of my duties, i<br>document is b | nt the appaintment as registered agent a   | inters relative to the proper and complete performan<br>ligation of my position as registered agent. Or, if the | ice<br>his<br>he |
|   | in Le  | 6/12/22   |                  |
| // ( \ S  | ignature of Registered Agent   | Date  | -                |

\* \* \* 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)