

756825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

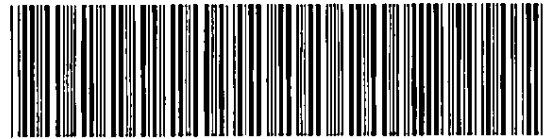
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600406833306

6:04 AM
JUN 20 2023

04/21/23--01011--011 **35.00

2023 APR 21 PM 1:55
7:10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Banyan Springs Patio Villas Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 756825

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:

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 notification)

For further information concerning this matter, please call:

Scott J. Lee, Esq.

Name of Contact Person

at (561) 340-4555

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

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 or registered agent, or both, in the State of Florida.

1. The name of the corporation: Banyan Springs Patio Villas Association, Inc.
2. The principal office address: 10780 Cedar Point Boulevard, Boynton Beach, Florida 33437
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/17/1981 Document number: 756825
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)

Law Office of J.M. Cunha PA

601 Heritage Dr # 424

Jupiter, FL 33458

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SJW Law Group, PLLC

12300 South Shore Boulevard, Suite 202

P.O. Box NOT acceptable

Wellington, Florida 33414

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.



Signature of an officer or director

Robert Eisbinder

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document 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.



Signature of Registered Agent

4/12/2022

Date

If signing on behalf of an entity:

Scott J. Lee

Typed or Printed Name

*** 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)

2023 APR 21 PM 1:55