

757101

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

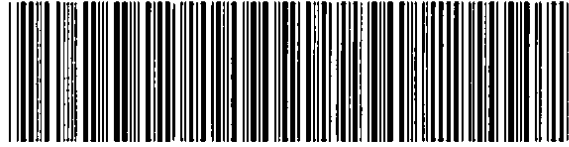
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SECRETARY OF STATE
DIVISION OF CORPORATIONS & BUSINESSES

COVER LETTER

TO: : Amendment Section
Division of Corporations

SUBJECT: Aspen Glen Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 757101

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:

Heidi Sagel

Name of Contact Person

Indian Spring Master Association

Firm/Company

5995 Bannock Terrace

Address

Boynton Beach, FL 33437

City/State and Zip Code

heidi.sagel@ismaster.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heidi Sagel

Name of Contact Person

at (561) 734-8005

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: Aspen Glen Condominium Association, Inc.
2. The principal office address: 5995 Bannock Terrace, Boynton Beach, FL 33437
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 4/1/1981 Document number: 757101
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, P.A.

601 HERITAGE DRIVE, SUTIE #424

JUPITER, FL 33458

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

Stoloff and Manoff

1818 S. Australian Ave, Suite 400

P.O. Box NOT acceptable

West Palm Beach, FL 33409

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]
Signature of an officer or director

WILLIAM KING, President
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]
Signature of Registered Agent

November 10, 2023 11/10/2023

Date

If signing on behalf of an entity:

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)

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