

757267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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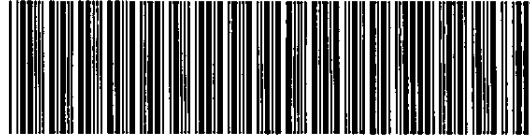
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Signature]*

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JUL 25 2016

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July 15, 2016

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**VIA REGULAR MAIL**


Re: Cypress Chase North Condominium No. 3 Association, Inc.  
Change of Registered Agent

Dear Sir/Madam:

Enclosed please find the Statement of Change of Registered Agent for Cypress Chase North Condominium No. 3 Association, Inc. and check #14054 in the amount of \$35.00.

Please do not hesitate to contact our office should you have any questions or concerns.

Very truly yours,

  
THOMAS J. TIGHE, ESQ.  
For the Firm

Encl.

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CYPRESS CHASE NORTH CONDOMINIUM NO. 3 ASSOCIATION INC.  
Name of Corporation

**DOCUMENT NUMBER:** 757267

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:

Thomas J. Tighe, Esq.

Name of Contact Person

Tucker & Tighe, P.A.

Firm/Company

800 E. Broward Blvd., Ste 710

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

law@tuckertighe.com

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

For further information concerning this matter, please call:

Thomas J. Tighe, Esq.

Name of Contact Person

at (954) 467-7744

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

**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: Cypress Chase North Condominium No. 3 Association, Inc.
2. The principal office address: 3241 N.W. 47th Terrace  
Lauderdale Lakes, FL 33319
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 06/25/1981 Document number: 757267
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)

Steven A Wagner, P.A.

3275 W Hillsboro Blvd., Suite 205

Deerfield Beach, FL 33442

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

Tucker & Tighe, P.A.

800 E Broward Blvd., Ste 710

P.O. Box NOT acceptable

Fort Lauderdale, FL 33301

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

Charmaie Brooks, 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

7/15/18  
Date

If signing on behalf of an entity:

Thomas J. Tighe  
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 (03/12)

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TALLAHASSEE, FLORIDA