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R. WHITE



Kenneth S. Direktor, Esq. Shareholder Phone: (954) 965-5050 Fax: (954) 985-4176 kdirektor@bplegal.com

1 East Broward Blvd., Suite 1800 Ft. Lauderdale, Florida 33301

August 20, 2015

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

Re: The Pines of Springtree Condominium I, Inc.

Document No. 763134

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office/Agent form along with Check #20770 in the amount of \$35.00 made payable to the Florida Department of State to cover the cost of filing.

Should you have any questions, please do not hesitate to contact me. Thank you.

Very truly yours,

Kenneth S. Direktor

For the Firm

KSD/aw Enclosure

ACTIVE: 7494947_1

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

statement of cl	e provisions of sections 607.0502 hange is submitted for a corporal	ion organized under the	laws of the State of	Florida
	der to change its registered office	, ,	•	Florida.
1. The name o	f the corporation: THE PINES OF	SPRINGTREE CONDO	MINIUM I, INC	
2: The principa	al office address: 4502 Inverrary	NAGEMENT, LLC Blvd.		
	Lauderhill, FL	33319'	a gradon	
3. The mailing	address (if different): 4502 Inver			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•	Lauderhill,	FL:33319		
4. Date of inco	rporation/qualification: 05/04/19	Docume	nt number: 763134	
	nd street address of the current re artiment of State: (If resigned, ent		tered office on file w	一是
	MAGÎLL, LISA BECKER & POLIAKOFF, P.A.			FILF IG 24 MASSI
	3111 Stirling Road			
	Fort Lauderdale, FL 33312			7: 45
6. The name ar (if changed)	nd street address of the new regis	tered agent (if changed)	and for registered of	
	BECKER & POLIAKOFF, P.A	Å.		
	I.E. Broward Blvd., Suite 1800			
		D. Box NOT acceptable		
	Fort Lauderdale, FL 33301	,····		1
The street addi	ress of its registered office and the identical.	he street address of the	business office of it	s registered agent,
Such change wanthorized by	vas authorized by resolution duly the board, or the corporation has	adopted by its board of been notified in writing	f directors or by an gof the change.	officer so
1		Robert J	uliano, VP	
	ture of an officer or director		inted or typed name and lit.	
I hereby accep I further agree performance o agent. Or, if it hereby confirm	of the appointment as registered in to comply with the provisions of my duties, and I am familiar whis document is being filed mere in that the colporation has been t	agent and agree to act if fall statutes relative to ith and accept the oblig ly to reflect a change in actified in writing of thi	in this capacity. the proper and com ation of my position the registered offic s change.	plete as registered e address, I
-1/0		•	8/20/15	
Si	gnature of Registered Agent		Date	·
If signing on bo	ehalfőfan entity:			
Kan	Typed or Printed Name	_		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE.

MAIL TO: DIVISION OF CORPORATIONS, P.O. Box 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

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