

764823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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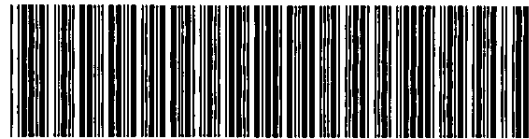
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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C. LEWIS
JUL 17 2014
EXAMINER

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June 27, 2014

Department of State
ATTENTION: AMENDMENT SECTION
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: The Gardens at Palm-Aire Condominium Association, Inc.

Dear Sir or Madam:

Enclosed please find the original signed Statement of Change of Registered Office or Registered Agent form for The Gardens at Palm-Aire Condominium Association, Inc. along with our firm's check in the amount of \$35.00.

Also enclosed is an extra copy of the Statement of Change. Please date-stamp a copy of same and return it to us along with the receipt in the attached self addressed stamped envelope.

Thank you for your assistance and if you have any questions, please call our office.

Very truly yours,



BETH G. LINDIE

BGL/aev
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Gardens at Palm-Aire Condo. Assoc. Inc.
Name of Corporation

DOCUMENT NUMBER: 764823

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:

Beth G. Lindie, Esq.

Name of Contact Person

Esler & Lindie, P.A.

Firm/Company

400 SE 6th Street

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

blindie@eslerandlindie.com

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

For further information concerning this matter, please call:

Beth G. Lindie

Name of Contact Person

at **954 764-5400**

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: The Gardens at Palm-Aire Condo. Assoc., Inc.
2. The principal office address: 3010-3040 N.W. 68th Street, Fort Lauderdale, FL 33309
3. The mailing address (if different): Royal Property Management, Inc., P.O. Box 771627, Coral Springs, FL 33077
4. Date of incorporation/qualification: 09/03/1982 Document number: 764823
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)

Royal Property Management, Inc.

8584 Shadow Court

Coral Springs, FL 33071

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

Beth G. Lindie, Esq.

400 SE 6th Street

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.

Joan Kizer
Lori Russo

Signature of an officer or director

Joan Kizer, Board Member

Lori Russo, 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.

Beth Lindie
Signature of Registered Agent

June 26, 2014
Date

If signing on behalf of an entity:

Beth Lindie
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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