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## **COVER LETTER**

| TO:  | TO: Amendment Section Division of Corporations |   |   |        |  |
|--|--|---|---|--------|--|
| SUBJE  | ECT:   | Waterchase Homeow                         | ners' Association, Inc.                           |        |  |
| DOCU   | MENT NU  | MBER:                                     | 767761  |        |  |
| The en   | closed States                                  | ment of Change of Registered O            | ffice/Agent and fee are submitted for filing.     |        |  |
| Please   | return all cor                                 | rrespondence concerning this ma           | atter to the following:                           |        |  |
|  |  |   |   |        |  |
|  | _  | Jeffrey R                                 | embaum, Esq. Contact Person                       |        |  |
|  | •  | Name of                                   | Contact Person                                    |        |  |
|  |  | Other Charles Driver of                   | D   T   (0     1   D   4                          |        |  |
|  |  |   | er, De La Torre &Sobel, P.A.  //Company           |        |  |
|  |  | `   |   |        |  |
|  |  | 1675 Palm Bea                             | ch Lakes Blvd., #500                              |        |  |
|  |  |   | Address   |        |  |
|  |  |   |   |        |  |
|  |  | West Palm 6                               | Beach, FL 33401<br>e and Zip Code                 |        |  |
|  |  | City/Stat                                 | e and Zip Code                                    |        |  |
|  | _  |   | siegfriedlaw.com                                  |        |  |
| E-mail address: (to be used for future annual report notification)   |  |   |   |        |  |
|  |  |   |   |        |  |
| For fur  | ther informa                                   | tion concerning this matter, plea         | se call:  |        |  |
|  | Jeffr  | ey Rembaum, Esq.                          | at ( 561 ) 296-544                                | 14     |  |
|  | Nan  | ne of Contact Person                      | at ( 561 ) 296-544  Area Code & Daytime Telephone | Number |  |
| Enclosed is a \$35.00 check made payable to the Department of State. |  |   |   |        |  |
|  |  | Mailing Address:<br>Amendment Section     | Street Address:<br>Amendment Section              |        |  |
|  |  | Division of Corporations<br>P.O. Box 6327 |   |        |  |
|  |  | Tallahassee, FL 32314                     | Clifton Building 2661 Executive Center Circ       | cle    |  |
|  |  |   | Tallahassee, FL 32301                             | -      |  |

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

| statement of ch  | provisions of sections 607.0502, 617.0.<br>ange is submitted for a corporation org<br>er to change its registered office or regi  | anized under the laws of the State   | of Florida  |
|--|---|--|---|
|  | the corporation: Waterchase Holloffice address: 9006 Woodlark Te  |  |   |
| 3. The mailing   | address (if different):   |  |   |
| 4. Date of incor   | poration/qualification: 3/25/198  | 3 Document number:   | 767761  |
|  | d street address of the current registered<br>artment of State: (If resigned, enter resig   |  | e with the  |
|  | Guy Shir, Esq.  |  | <del></del>   |
|  | c/o Kahan Shir, PL  |  |   |
|  | 1800 NW Corporate Blvd., Ste  | e. 200, Boca Raton, FL 33  | 431 FEB 22  |
| 6. The name and (if changed):  |   | gent (if changed) and /or registere  | d officerry S. F. F. F. S. S. F. F. S. S. S. F. F. S. |
|  | SKRLD, Inc. 201 Alhambra Circle, #1102  | •  | TATE ORIBA  |
|  |   | NOT acceptable   |   |
|  | Coral Gables, FL 33134  |  | <del></del>   |
| The street addr<br>as changed wil  | ess of its registered office and the stre<br>I be identical.  | et address of the business office  | of its registered agent,  |
| ( )  | as authorized of resolution duly adop<br>he board, or the corporation has been<br>ure of an officer or director   | ted by its board of directors or be notified in writing of the change Printed or typed name  | and the   |
| I hereby accept<br>I further agree<br>of my duties, an<br>document is be<br>corporation ha | t the appointment as registered agent<br>to comply with the provisions of all st<br>nd I am familiar with and accept the o<br>ing filed merely to reflect a change in<br>s been notified in writing of this chang | and agree to act in this capacity<br>atutes relative to the proper and<br>bligation of my position as regi<br>the registered office address, Ti<br>ge. | l<br>complete performance<br>stered agent. Or, if this<br>hereby confirm that the         |
|  | gnature of Registered Agent   | $\frac{2/17/18}{\text{Date}}$  | <u> </u>  |
| ·  | ehalf of an entity: A. Lerner   |  |   |
|  | Current on Drinted Name   |  |   |

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