768210

,			
(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Do	cument Number)		
Certified Copies	_ Certificate	s of Status	
Special Instructions to	Filing Officer:		





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SECRETARY OF STATE
ONLY ANASSES FI ORIDA

FFR 1 4 2014 C. CARROTHERS 5297 West Copans Road Margate, Florida 33063 T | 954.486.7774 F | 954.486.7782

Attorneys at Law



DONNA DiMAGGIO BERGER, ESQ. dberger@KGBlawfirm.com

February 10, 2014

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

> Re: Boca Ridge Park Condominium Association, Inc. Change of Registered Agent

Dear Sir / Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations which has been properly completed by this office. Furthermore, enclosed please find a check made payable to the Florida Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed above.

Sincerely,

KATZMAN GARFINKEL & BERGER

Donna Di Maggio Berger, Esquire

Founding Partner

DDB:dts Enclosures

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\frac{F}{F}$ or change its registered office or registered agent, or both, in the State of Flo	LORIDA
1. The name of t	he corporation: Boca Ridge Park Condominium Associatio	n, Inc.
2. The principal	office address: Mahogany Services, Inc. 21 S.E. 5th Street, #100	
Boca Rato	n, FL 33432	
3. The mailing a	ddress (if different): SAME	
4. Date of incorp	poration/qualification: 05/02/1983 Document number:	768210
	street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned)	the
	Lauren Heller	
	21 S.E. 5th Street, #100	
	Boca Raton, FL 33432	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered offic	e
	KATZMAN GARFINKEL & BERGER	
	5297 WEST COPANS ROAD	
	PO Box NOT acceptable	
	MARGATE, FLORIDA 33063	•
The street addre as changed will	ss of its registered office and the street address of the business office of its be identical.	registered agent.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an one board, or the corporation has been notified in writing of the change.	fficer so
Signatur	Lefty A. O. Kim Beney A. O. Printed or Ayped name and title	DO TKES IDENT
I further a gree to of my duties, and document is bei	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and comp d I am familiar with and accept the obligation of my position as registered ng filed merely to reflect a change in the registered office address. I hereby been notified in writing of this change	Confirm that the
Sien	nature of Registered Agent Date	3 3
(3)	half of an entity:	O: 42
DOMMA DO	MACCIO REPOER FOO	

DONNA DIMAGGIO BERGER, ESQ.

Typed or Printed Name

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