

771243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

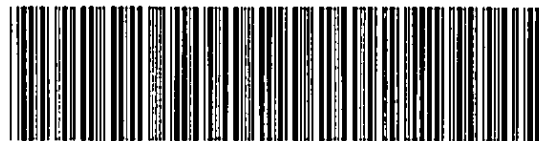
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SECRETARY OF STATE
TALLAHASSEE, FL



Donna DiMaggio Berger, Esq.
Shareholder
Board Certified Specialist, Condominium and
Planned Development Law
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Becker & Poliakoff
1 East Broward Blvd.
Suite 1800
Ft. Lauderdale, FL 33301

January 14, 2022

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

**Re: Viewpointe of Margate Condominium, Inc.
Document No. 771243**

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office/Agent form along with Check #30928 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,

A handwritten signature in black ink, consisting of a stylized, cursive 'D' and 'B'.

Donna DiMaggio Berger
For the Firm

DDB2/ar
Enclosure

**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: VIEWPOINTE OF MARGATE CONDOMINIUM, INC.
2. The principal office address: 1145 SAWGRASS CORP. PKWY, SUNRISE, FL 33323
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/15/1983 Document number: 771243
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)

KATZMAN CHANDLER

6535 NOVA DRIVE, SUITE 109

FORT LAUDERDALE, FL 33317

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

BECKER & POLIAKOFF, P.A.

1 E BROWARD BLVD., SUITE 1800

P.O. Box NOT acceptable

FT. 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.

Donald Cullen
Signature of an officer or director

Donald Cullen 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

12/14/2021

Date

If signing on behalf of an entity:

Donna DiMaggio Berger, Esq.

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 (04/13)

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