

(Requestor's Name)	
(Address)	80033
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	44.45.4.4
(Document Number)	11/01/19
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



36314358

9--01005--014 +∗35.00

20191:0"-1 AH 8: 58

R. WHITE DEC 0 2 2019

SACHS SAX CAPLAN ATTORNEYS AT LAW

SUITE 200 6111 BROKEN SOUND PARKWAY NW BOCA RATON, FLORIDA 33487

> TELEPHONE (561) 994-4499 DIRECT UNE (561) 237-6840 FACSIMILE (561) 994-4985

LOUIS CAPLAN, ESQ. lcaplan@ssclawfirm.com

October 29, 2019

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

RE: Change of Registered Agent Forms and filing fee (\$35)
Capri at Mizner Country Club Neighborhood Association, Inc.
Del Prado at Mizner Country Club Neighborhood Association, Inc.
Marbella at Mizner Country Club Neighborhood Association, Inc.
Palma at Mizner Country Club Neighborhood Association, Inc.
San Marino at Mizner Country Club Neighborhood Association, Inc.

Dear Sir/Madam:

Please find enclosed Change of Registered Agent forms and checks payable to Florida Department of State in the amount of \$35.00 for each corporation referenced above.

If you have any questions, please contact Clara Garcia at (561) 237-6839.

Very truly yours.

LOUIS CAPLAN

LC/chg

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 Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida recognition or control of the State of Florida.
	the corporation: Capri at Mizner Country Club Neighborhood Association, Inc.
	office address: 16102 Mizner Club Drive, Delray Beach, FL 33446
3. The mailing a	ddress (if different): Same as above
4. Date of incorp	poration/qualification: 01/24/2000 Document number: N00000000429
5. The name and Florida Depar	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Campbell Property Management
	Campbell Property Management 16102 Mizner Club Drive
	Delray Beach, FL 33446
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office ϖ
	Associated Corporate Services
	6111 Broken Sound Parkway NW, Suite 200
	P.O. Box NOT acceptable Boca Raton, FL 33487
The street address as changed will b	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was author ized by the	s authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
100	of an officer or director Printed or typed name and title
hereby accept to further agree to performance of a reent. Or, if this dereby confirm to	he appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete The desired with the provisions of all statutes relative to the proper and complete The desired with an end of the obligation of my position as registered The document is being filed merely to reflect a change in the registered office address, I The document is being filed merely to reflect a change in the registered office address, I
	June 20, 2019
Signing on beh	of Registered Agent - Date
	Caplan, Esquire
 	ed 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 * * *