N00435

(Requestor's Name)
(Address)
·
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: VILLAGE OF SANDALWOOD LAKES NOR	TH HOMEOWNERS ASSOCIATIO
Name of Corporation	
DOCUMENT NUMBER: N00435	
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:
GERMAN VILLAMIZAR	
Name of Contact Person	
M.M.I. OF THE PALM BEACHES, INC.	
Firm/Company	···
11770 US HIGHWAY ONE, SUITE 501E	
Address	
PALM BEACH GARDENS, FLORIDA 33408	
City/State and Zip Code	
GVILLAMIZAR@MIAMIMANAGE	EMENT.COM
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please ca	all·
1 of futures information concerning this matter, piease a	uii.
GERMAN VILLAMIZAR	at (⁵⁶¹)686-7818 x 202 Area Code & Daytime Telephone Number
Name of Contact Person	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

Amendment Section
Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, t hange is submitted for a corporation organized under the laws of the State of <mark>FLORIDA</mark> der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: VILLAGE OF SANDALWOOD LAKES NORTH HOMEOWNERS AS:	SOCIATI
	al office address: 11770 US HIGHWAY ONE, SUITE 501E, PALM BEACH GARDENS,	
3. The mailing a	address (if different):	
4. Date of incor	prporation/qualification: 12/19/1983 Document number. N00435	
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	20
	SIEGFRIED, RIVERA, LERNER, DE LA TORRE	13 N
	1665 PALM BEACH LAKES BLVD, SUITE 500	2021 SEP - T
	WEST PALM BEACH, FL 33401	PH
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered office	3.08
	KAYE BENDER REMBAUM, P.L.	
	1200 PARK CENTRAL BLVD., SOUTH	
	P.O. Box NOT acceptable	
	POMPANO BEACH, FL 33064	
The street addr as changed wil	lress of its registered office and the street address of the business office of its register ill be identical.	ed agent,
Such change wanthorized by t	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	o
May	gary greene, president	
I hereby accept I further agree of my duties, and document is be corporation ha	put the appointment as registered agent and agree to act in this capacity, et to comply with the provisions of all statutes relative to the proper and complete per and I am familiar with and accept the obligation of my position as registered agent, eing filed merely to reflect a change in the registered office address, I hereby confirmation of my position as registered agent. Sometimes of Registered Agent Date Dehalf of an entity:	formance Or, if this n that the
JEFFREY A. RI	REMBAUM	
	Typed or Printed Name	

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