(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e) ·
(Do	cument Number)	· · · ·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	,



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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: Westview Condominium Associatio (Name of Corporatio	n No. Ten, Inc.			
DOCUMENT NUMBER: N00644				
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.			
Please return all correspondence concerning this matter to the fo	llowing:			
Lester Dupuis	3			
(Name of Contact Person)				
TDSunshine Property Management (Firm/Company)				
(Firm/Company)				
4330 West Broward B (Address)	lvd, Suite I			
(Address)				
Plantation, Florida 33317 (City/State and Zip Code)				
· · · · · · · · · · · · · · · · · · ·				
For further information concerning this matter, please call:				
Lester Dupuis at ( (Name of Contact Person) (A	954 ) 585 - 0228 Trea Code & Daytime Telephone Number)			
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of	State.			
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle			
1 ananassee, 1 is 323 17	Tallahassee, FL 32301			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTIL 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.	
	I. The name of the corporation: Westview Condominium Association No. Ten. Inc.	
	2. The principal office address: c/o TDSunshine Property Management	
	4330 West Broward Blvd, Suite I, Plantation, Florida 33317	
_	3. The mailing address (if different): - c/o-TDSunshine-Property-Management	
	P.O. Box 24624, Fort Lauderdale, Florida 33307	
	4. Date of incorporation/qualification: 12/28/1983 Document number: N00644	
	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)	
	Straley & Otto, P.A.	
	2699 Stirling Road, Suite C-207	77,
	Fort Lauderdale, Florida 33312	
Straley & Otto, P.A.  2699 Stirling Road, Suite C-207  Fort Lauderdale, Florida 33312  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	TDSunshine Property Management, LLC	
	4330 West Broward Blvd, Suite I, Plantation, Florida 33317 (P.O. Box NOT acceptable)	
	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.	
/	January Communition (Seco) PENNY HERWANDER (Sec.)	)
	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 of Registered Agent) ///10/08	
	If signing on behalf of an entity:	
	Lester Dupus (Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

\* \* \* FILING FEE: S35.00 \* \* \*