

# NO1000 002 628

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

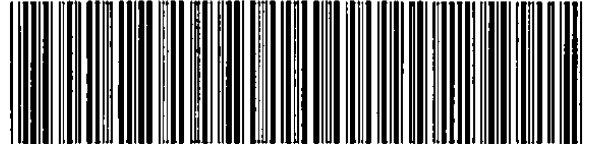
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2019 JUL 22 PM 6:26

C. GOLDEN

JUL 30 2019

**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: The Preserve At Walnut Creek Condominium Association, Inc.  
2. The principal office address: c/o Next Generation Management Services  
8560 W. State Rd. 84, Davie, FL 33324  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 04/13/2001 Document number: N01000002628

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)

Meloni, E., Esq. c/o The Meloni Law Firm

900 SW 40th Avenue

Plantation, FL 33317

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

Meloni, E., Esq. c/o The Meloni Law Firm

1701 NE 164th Street, Suite 303

P.O. Box NOT acceptable

North Miami Beach, FL 33162-4018

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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.

Lynne Brodsky  
Signature of an officer or director

Lynne Brodsky Treasurer  
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.

Edoardo Meloni  
Signature of Registered Agent

7/12/19  
Date

If signing on behalf of an entity:

Lynne Brodsky  
Typed or Printed Name

*at to pay*

\*\*\* 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 (03/12)