

NO1000008389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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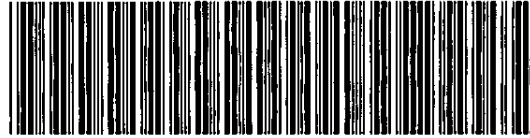
(Business Entity Name)

(Document Number)

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C. CARROTHERS

Siegfried · Rivera · Hyman · Lerner
De la Torre · Mars · Sobel

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LAURA M. MANNING-HUDSON
LMANNING@SRHL-LAW.COM

REPLY TO WEST PALM BEACH OFFICE

January 19, 2016

Sent Via U.S. Mail

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

Re: Merriweather Village Homeowners' Association, Inc. ("Association")

Dear Sir/Madam:

Enclosed please find the "Statement of Change of Registered Office or Registered Agent or Both for Corporations" for the above-referenced Association, along with the Association's check number 001001 in the amount of \$35.00 for the filing of same.

If you have any questions or require further documentation, please contact the undersigned.

Very truly yours,

SIEGFRIED, RIVERA, HYMAN, LERNER,
DE LA TORRE, MARS & SOBEL, P.A.


Laura M. Manning-Hudson, Esq.

LMH/kmr
Enclosures

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MERRIWEATHER VILLAGE HOA
Name of Corporation

DOCUMENT NUMBER: N01000008389

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:

Bill Amonica / Debra Casablanca

Name of Contact Person

Phoenix Management Services, Inc.

Firm/Company

6131B Lake Worth Rd

Address

Greenacres, FL 33463

City/State and Zip Code

debbielw@phoenixfla.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Casablanca

Name of Contact Person

at (561) 964-1550

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

2100483

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: Merriweather Village Homeowners Association, Inc.
2. The principal office address: 6131B Lake Worth Rd., Greenacres, FL 33463

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/30/2001 Document number: N01000008389

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)

Sigfried, Rivera, Lerner, De La Torre etc

1675 Palm Beach Lakes Blvd Suite 500

West Palm Beach, FL 33401

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

SKRLD, Inc

201 Alhambra Circle 11th Floor

P.O. Box NOT acceptable

Coral Gables, FL 33134

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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.

Adriana Deolt
Signature of an officer or director

ADRIANA DEOLT, 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.

Adriana Deolt Pres.
Signature of Registered Agent

1/19/16
Date

If signing on behalf of an entity:

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