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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R A / R O / C H S

JUN 22 2016
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lakes of Delray
Name of Corporation

DOCUMENT NUMBER: NO 1338

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:

Stan Latopolski
Name of Contact Person

Lakes of Delray
Firm/Company

15055 Lakes of Delray Blvd
Address

Delray Beach FL 33484
City/State and Zip Code

thelakesod@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stan Latopolski at (561) 495-1598
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

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

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Lakes of Delray, Inc.

2. The principal office address: 15055 Lakes of Delray Blvd.
Delray Beach, FL 33484

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 2/9/84 Document number: NO1338

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)

Thomas Rossin / St John, Rossin, Podesta & B me
1601 Forum Place Suite 200
West Palm Beach, FL 33400

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

Monita Leavy / Leavy Law, P.A.
800 Village Savane Crossing, Suite 347
P.O. Box NOT acceptable
Palm Beach Gardens, FL 33400

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.

Milton Walker Pres.
Signature of an officer or director

MILTON WALKER Pres.
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.

[Signature]
Signature of Registered Agent

6-14-16
Date

If signing on behalf of an entity:
Maria S. Leavy
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

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