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R. WHITE



Donna DiMaggio Berger, Esq. Shareholder Phone: (954) 364-6031 Fax: (954) 985-4176 dberger@bplegal.com

1 East Broward Blvd., Suite 1800 Ft. Lauderdale, Florida 33301

September 19, 2014

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

Re: Duvall Place Condominium Association, Inc.; Ref. Number: N04000001128

Dear Madam/Sir:

Enclosed please find a copy of your Letter Number 714A00016450 acknowledging receipt of the above corporation's check totaling \$35.00, along with a form that was incorrectly submitted.

Enclosed please find the correct form, Statement of Change of Registered Office/Agent. We would ask that you accept this form as well as the previously submitted \$35.00 check to cover the cost of filing.

Should you have any questions, please do not hesitate to contact me. Thank you.

Very truly yours,

DONNA DIMAGGIO BERGER

For the Firm

DDB/dts Enclosures

ACTIVE: 6215922 1



July 31, 2014

CHRISTOPHER CRATER 401 W ATLANTIC AVE STE R-12 DELRAY BEACH, FL 33444

SUBJECT: DUVALL PLACE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N04000001128

We have received your document for DUVALL PLACE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 4 is incomplete. Please complete page 4 in it's entirety.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 714A00016450



COVER LETTER

Division of Corporations Durall Place Condo Assoc DOCUMENT NUMBER: 100400001128 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Christopher Cont (Name of Contact Person) DWall Place Condo C/o Danon Management Groy 401 W. Atlantic Are Suite R-12 Delray Beach FL 33 (City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mistopher Crain
(Name of Contact Person at (786) 663-6448 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■ \$35 Filing Fee □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Duvall Place Condominium Association, Inc.
2. The principal office address: 122 SE 6th Ave.
Delray Beach, FL 33483
3. The mailing address (if different): 401 W. Atlantic Ave., R-12
Delray Beach, FL
4. Date of incorporation/qualification: 08/16/2002 Document number: N04000001128
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)
Katzman Garfinkel & Berger
5297 West Copans Road
Margate, FL 33063
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Becker & Poliakoff, P.A.
1 East Broward Blvd., Suite 1800
P.O. Box NOT acceptable
Fort Lauderdale, FL 33301
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.
Signature of an officer or director Signature of an officer or director 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 illed 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 Date
If signing on behalf of an entity:
Jonna Di Maggio Berger Esq. Typed or Johned 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 CR2E045 (03/12)