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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

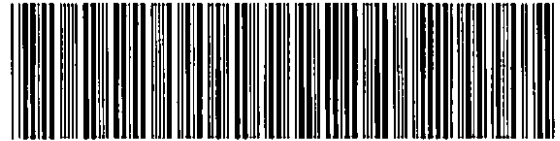
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JAN 24 2019

D CUSHING

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: SANDPIPER COVE AT BOTANICA CONDOMINIUM ASSOCIATION, INC.  
Name of Corporation

DOCUMENT NUMBER: N04000005070

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:

RENEE RENUART

Name of Contact Person

WASSERSTEIN, P.A.

Firm/Company

301 YAMATO ROAD, SUITE 2199

Address

BOCA RATON, FL 33431

City/State and Zip Code

danw@wassersteinpa.com

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

For further information concerning this matter, please call:

RENEE RENUART

Name of Contact Person

at ( 561 ) 288-3999

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 7, 2019

RENEE RENUART  
WASSERSTEIN, P.A.  
301 YAMATO ROAD, SUITE 2199  
BOCA RATON, FL 33431

SUBJECT: SANDPIPER COVE AT BOTANICA CONDOMINIUM  
ASSOCIATION, INC.  
Ref. Number: N04000005070

We have received your document for SANDPIPER COVE AT BOTANICA 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):

The registered agent must sign accepting the designation.

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 819A00000360

2019 JAN 15 PM 1:17

**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: SANDPIPER COVE AT BOTANICA CONDOMINIUM ASSOCIATION, INC.  
2. The principal office address: C/O Realtime Property Management of South Florida, LLC  
140 Intracoastal Pointe Dr., Suite 306, Jupiter, FL 33477  
3. The mailing address (if different): N/A

4. Date of incorporation/qualification: 5/20/2004 Document number: N04000005070

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)

GARY FIELDS, P.A.

4440 PGA BLVD., SUITE 308

PALM BEACH GARDENS, FL 33410

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

WASSERSTEIN, P.A.

301 YAMATO ROAD, SUITE 2199

P.O. Box NOT acceptable

BOCA RATON, FL 33431

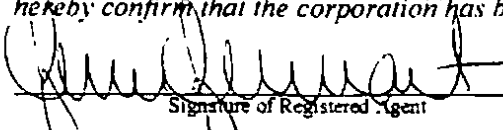
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

WILLIAM T. LIVERNISE 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 of Registered Agent

12/13/18

Date

If signing on behalf of an entity:

RENEE RENUART

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

CR2E045 (03/12)

19 JAN 14 AM 10:00  
FILED  
CLERK OF THE  
SOLICITOR GENERAL'S  
OFFICE  
TALLAHASSEE, FLORIDA