

N040000007457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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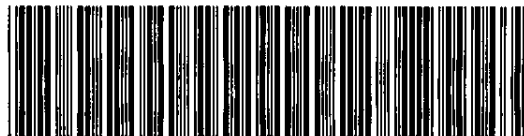
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JAN - 7 AM 8:46

JAN 13 2015
T. CARTER

**BECKER &
POLIAKOFF**

Mark D. Friedman, Esq.
Shareholder
Phone: (561) 820-2868 Fax: (561) 832-8987
mfriedman@bplegal.com

Bank of America Centre
625 N. Flagler Drive, 7th Floor
West Palm Beach, Florida 33401

January 5, 2014

SENT VIA REGULAR U.S. MAIL

Corporate Records Bureau
Divisions of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32314

**Re: Belvedere Isles Condominium Association, Inc., No. 1 and Belvedere Isles
Condominium Association, Inc., No. 2.; Statement of Change of Registered
Office or Agent or Both for Corporations**

Dear Sir/Madam:

Enclosed please find the two executed Statements of Change of Registered Office or Registered Agent form for the above-referenced Associations, as well as a check in the amount of **\$70.00** to cover the filing fee cost.

If you have any questions or require anything further, please do not hesitate to contact me. Thank you in advance for your prompt attention to this matter.

Very truly yours,


Mark D. Friedman
For the Firm

MDF/asm
Enclosures

cc: Belvedere Isles Master Association, Inc.

ACTIVE: 6545085_1

**STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To the Secretary of State of the State of Florida.

Pursuant to the provision of Sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida submits the following statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida.

15 JAN -7 AM 8:46

1. The name of the corporation is Belvedere Isles Condominium Association Inc. No. 1.
2. The mailing address of the corporation is: c/o Board of Directors, P.O. Box 222697, West Palm Beach, FL 33432
3. Date of incorporation/qualification: 07/29/2004 Document number: N04000007457
4. The name and address of the current registered agent and office
Sea Breeze CMS, Inc. 4227 Northlake Boulevard, Palm Beach Gardens, FL 33410
5. The name and address of the new registered agent and/or registered office is: **Becker & Poliakoff, P.A., 625 North Flagler Drive 7th Floor, West Palm Beach, FL 33401**

The street address of its registered office and the 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.

Leon Mahaley
(Signature of an officer, chairman or vice chairman of the Board)

12-20-2014
(Date)

LEON MAHALEY SECRETARY
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

[Signature]
(Signature of Registered Agent)

Jan 5, 2015
(Date)

It signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

(Date)

• ** FILING FEE: \$35.00 ** •

• Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314