

W 01/0000 57433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

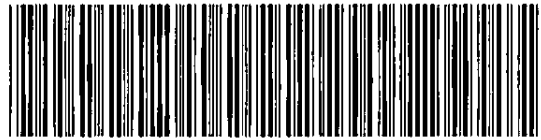
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900435074189

08/22/24--01022--016 **35.00

2024 AUG 22 AM 10:09
CLERK OF STATE
TALLAHASSEE, FL

08/22/24

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hyacinth House Condominium Association Inc.
Name of Corporation

DOCUMENT NUMBER: N04000009833

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:

Scot Gooding

Name of Contact Person

Hyacinth House Condominium Association Inc

Firm/Company

3061 NE 49 Street

Address

Fort Lauderdale, FL 33308

City/State and Zip Code

Hyacinthhousecondos@gmail.com

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

For further information concerning this matter, please call:

Scott Gooding

at (954)

553-0976

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: Hyacinth House Condominium Association Inc
2. The principal office address: 3061 NE 49 Street Fort Lauderdale, FL 33308
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 10-18-2004 Document number: N04000009833
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)

Majorie Brunelli Esq

1615 Forum Place Suite 3A

West Palm Beach, FL 33401

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

Scott Gooding

290 SE 9 Court

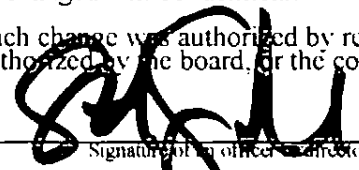
P.O. Box NOT acceptable

Pompano Beach, FL 33060

RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL
JUN 10 2024 AM 10:09

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.

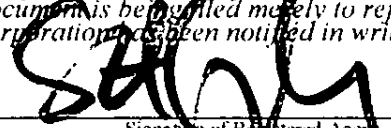


Signature of an officer or director

Scott Gooding/HOA 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.



Signature of Registered Agent

08/19/2024

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
CR2E045 (04/13)