NO5000001938

(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations The Residences on Hollywood Beach Condominium Association, Inc. Name of Corporation 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: Steven Zamora Name of Contact Person The Residences on Hollywood Beach Condominium Association, Inc. Firm/Company 3001 S Ocean Drive Hollywood, FL 33019 City/State and Zip Code szamora@apmanagement.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Darrin Gursky Name of Contact Person 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
The name of the control of the principal of the principal of the control of	the corporation: The Residences on Hollywood Beach Condominium Association, Inc. office address: 3001 S Ocean Drive, Hollywood, FL 33019
3. The mailing ac	address (if different):
4. Date of incorp	poration/qualification: 02/24/05 Document number: N05000001938
	d street address of the current registered agent and registered office on file with the thrent of State: (If resigned, enter resigned)
	Marc Halpern
	800 Douglas Rd, Suite 880
	800 Douglas Rd, Suite 880 Coral Gables, FL 33134 SP
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office.
	Grusky Ragan, PA
	14 NE 1st Avenue, Suite 703
	P.O. Box NOT acceptable Miami, FL 33132
The street address as changed will h	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Sigitaturi	Total of officer or director Printed or typed name and title
perjormance of n ago nt. Or, if this	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered state and the composition is the property of the composition of the segistered office address, I that the corporation has been notified in writing of this change.
WS.	April 21, 2016
-	nature of Registered Agent Date
- -	·
	ped or Printed Name
The street address changed will is changed will is Such change was authorized by the Signature of the further agree to be formance of the further or, if this is every consum to signate on behavior on behavior on the consumption of the consum	Grusky Ragan, PA 14 NE 1st Avenue, Suite 703 P.O. Box NOT acceptable Miami, FL 33132 The identical are special and the street address of the business office of its registered agent, be identical. The identical are special as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change. The officer of director are printed or typed name and title The appointment as registered agent and agree to act in this capacity: The occupity with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered such as a change in the registered office address, I that the corporation has been notified in writing of this change. April 21, 2016 The instance of Registered Agent Date Date

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *