

N05 00000 3798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

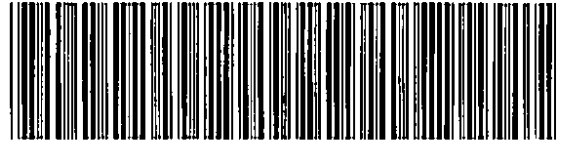
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JUL 21 2022
TALLAHASSEE, FL
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WATERSIDE AT BOYNTON HOMEOWNERS' ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N05000003798

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:

Michael Ungerbuehler
Name of Contact Person
Sachs Sax Caplan, PL
Firm/Company
6111 Broken Sound Pkwy NW, Suite 200
Address
Boca Raton
City/State and Zip Code

mungerbuehler@ssclawfirm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Ungerbuehler at (561) 994-4499
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: Waterside at Boynton Homeowners' Association, Inc.
- 2. The principal office address: Certified Residential Management Group, 160 Congress Park Drive, Suite 111
Delray Beach, FL 33445
- 3. The mailing address (if different): same as principal address
- 4. Date of incorporation/qualification: 4/14/2005 Document number: N05000003798
- 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)

Sajdera Morris
700 South Federal Highway, Suite 200
Boca Raton, FL 33432

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

Sachs Sax Caplan, PL.
6111 Broken Sound Parkway NW, Suite 200
Boca Raton, FL 33487
P.O. Box NOT acceptable

MAY 21 PM 7:10
 SECRETARY OF STATE
 TALLAHASSEE, FL
FILED

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

DAVID GOODMAN 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.

Michael Ungerbuehler
 Signature of Registered Agent

May 24, 2022
 Date

If signing on behalf of an entity:

Michael Ungerbuehler, Esq.
 Typed or Printed Name

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