

N06 00000 2395

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

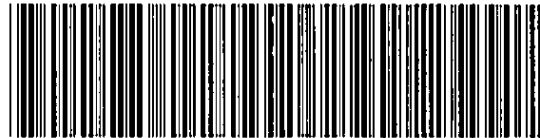
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400340483774

02 10/20--01000--035 \*\*35.00

2020 FEB 10 A 10:40

FILED

Qm  
3/5/20



12300 South Shore Blvd., Suite 202 • Wellington, Florida 33414  
(561) 340-4555 • [www.sjwlawgroup.com](http://www.sjwlawgroup.com)

February 4, 2020

**Via US Mail:**

Division of Corporations  
Attention: Sheila Young  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Change of Registered Agent Form for Corporation

Dear Ms. Young:

Please find enclosed a \$35.00 payment to the Department of State in addition to an executed Statement of Change of Registered Agent form for the following entity:

- St. Andrews Palm Beach Condominium II Association, Inc.

Please call me at (561) 231-5004 or email me at [Allison@sjwlawgroup.com](mailto:Allison@sjwlawgroup.com) to confirm receipt of this payment.

Thank you for your time and cooperation.

Very truly yours,

Sharlene C. Goldstein, Esq.

Enclosures: as stated

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** St. Andrews Palm Beach Condominium II Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N06000002395

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:

Scott Wortman, Esq.

Name of Contact Person

SJW Law Group, PLLC

Firm/Company

12300 South Shore Blvd., Suite 202

Address

Wellington, Florida 33414

City/State and Zip Code

scott@sjwlawgroup.com

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

For further information concerning this matter, please call:

Scott J. Wortman, Esq.

Name of Contact Person

at ( 561 ) 340-4555

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

**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: St. Andrews Palm Beach Condominium II Association, Inc.
2. The principal office address: 1081 Benoist Farms Road  
West Palm Beach, Florida 33411
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03-02-2006 Document number: N06000002395
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)

Korte & Wortman, P.A.

2041 Vista Parkway, #102

West Palm Beach, Florida 33411

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

SJW Law Group, PLLC

12300 South Shore Blvd., Suite 202

P.O. Box NOT acceptable

Wellington, Florida 33414

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

Misty Bust-Smith / Secretary  
\_\_\_\_\_  
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

01-17-2020  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Scott J. Wortman

\_\_\_\_\_  
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)

2020 FEB 10 A 10:40

FILED