

7/31/24 9:43 AM

1706000003928
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
 Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC
 Account Number : 120120000007
 Phone : (702)866-2500
 Fax Number : (702)900-2290

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: documents@incorp.com

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DEPT OF STATE
 DIVISION OF CORPORATIONS
 REGISTRATION TABLE

REGISTERED AGENT CHANGE

EAST PALM RESORT CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: East Palm Resort Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N06000003928

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.

Patricia Reyes
Name of Contact Person
InCorp Services, Inc.
Firm/Company
9107 West Russell Road Suite 100
Address
Las Vegas, NV 89148-1233
City/State and Zip Code
documents@incorp.com
E-mail address. (to be used for future annual report notification)

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For further information concerning this matter, please call:

Patricia Reyes on behalf of InCorp Services, Inc. at 800-246-2677
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$55.00 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

CR00043 (01-15)

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS

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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.

- The name of the corporation: East Palm Resort Condominium Association, Inc.
- The principal office address: 7777 Glades Rd, Suite 215
Boca Raton, FL 33434
- The mailing address (if different): 390 NE 191st St Ste 8139 Miami, FL 33179
- Date of incorporation/qualification: 04/10/2006 Document number: N06000003928
- 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)

RISE8 MANAGEMENT LLC7777 Glades Rd., Ste. 215Boca Raton, FL 33434

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

InCorp Services, Inc.3458 Lakeshore DriveP.O. Box Not acceptableTallahassee, FL 32312

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.

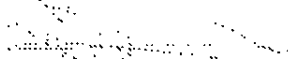


Signature of an officer or director

Robert Beyer, 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

07/26/2024

Date

If signing on behalf of an entity:

Louise Breytenbach on behalf of InCorp Services, Inc.

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
CR2E935 (9-1-13)

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