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## **COVER LETTER**

TO: Amendment Section Division of Corporations COLONY CLUB VILLAGE HOMEOWNERS ASSOCIATION, INC. Name of Corporation DOCUMENT NUMBER: N0600006282 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: Ashlee Vega Name of Contact Person Beachwold Residential, LLC Firm/Company 192 Lexington Avenue, Suite 901 New York, NY 10016 City/State and Zip Code avega@beachwold.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ashlee Vega Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address:** Street Address: Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

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

statement of char	nge is submitted for a corporation or	ganized under the laws of the State of Florida
<del></del>		gistered agent, or both, in the State of Florida.
1. The name of t	he corporation: COLONY CLUB	VILLAGE HOMEOWNERS ASSOCIATION, INC.
2. The principal	office address: C/O BEACHWO	OLD RESIDENTIAL, LLC
192 LEXII	NGTON AVENUE, SUITE 9	01, NEW YORK, NY 10016
3. The mailing a	ddress (if different): SAME AS A	BOVE
4. Date of incorp	oration/qualification: 6/9/2006	Document number: N06000006282
	street address of the current registere timent of State: (If resigned, enter res	ed agent and registered office on file with the igned)
	THE KAMMERMAN LAW	GROUP, P.A.
	123 NW 13TH STREET, S	STE 312 F. I. F. I
	BOCA RATON, FL 33432	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	SOUTH OXFORD MANAC	BEMENT LLC III III III III III III III III III
	3701 DANFORTH DRIVE	<u></u>
		NOT acceptable
	JACKSONVILLE, FL 3222	
_		eet address of the business office of its registered agent.
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.		
MLTA	e of an officer or director	GIDEON Z. FRIEDMAN
Thereby accent	the appointment as registered agent	Printed or typed name and title  and agree to act in this capacity. statutes relative to the proper and complete and accept the obligation of my position as registered reflect a change in the registered office address, I  ed in writing of this change.
Dul	ano an	10/19/2018
Sign	nature of Registered Agent	Date
If signing on bel	nalf of an entity:	
ANN MARIE		
Ту	ped or Printed Name	

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