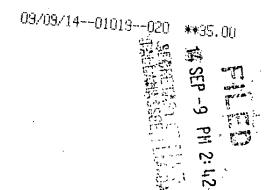
## N06000007244

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SABAL POINTE 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: Theresa M Lemme Name of Contact Person Konyk & Lemme PLLC Firm/Company 777 South Flagler Drive, Suite 800-West Tower Address West Palm Beach, Florida 33401 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Theresa M Lemme 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

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: SABAL POINTE CONDOMINIUM ASSOCIATION, INC.
2. The principal office address: 201-271 BONNIE BLVD, PALM SPRINGS, FL 33461
3. The mailing address (if different): C/O GUARANTEE MANAGEMENT SERVICES,
6925 N.W. 42ND STREET MIAMI, FL 33166
4. Date of incorporation/qualification: 07/07/2006 Document number: N06000007244
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)
ST JOHN ROSSIN & LEMME, PA
CENTURION TOWER, SUITE 701
1601 FORUM PLACE, WEST PALM BEACH, FL 33401
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
KONYK & LEMME PLLC
777 SOUTH FLAGLER DRIVE, SUITE 800 - WEST TOWER
P.O. DOX NOT acceptable
WEST PALM BEACH, FL 33401
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 shange 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 effect of director of director of director of the Signature of an effect of typed name and ditte
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 duites, 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 8/13/14
If signing on behalf of an entity:
Theresa M Lemme
Theresa M Lemme  Typed or Printed Name  CATALLARIA  CATALLARIA
* * * 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 (03/12)