

no6 325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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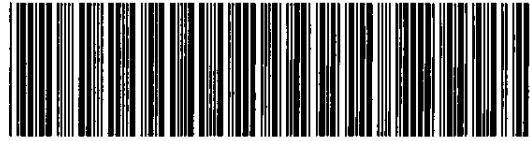
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 4 0 30

T. LEMIEUX

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Players Place Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N06325

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:

Guy M. Shir, Esq.

Name of Contact Person

Shir Law Group, P.A.

Firm/Company

1800 NW Corporate Blvd., Suite 200

Address

Boca Raton, FL 33431

City/State and Zip Code

gshir@shirlawgroup.com

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

For further information concerning this matter, please call:

Guy Shir

Name of Contact Person

at (561) 999-5999

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: Players Place Association, Inc.
2. The principal office address: Apex Association Management
6574 N. State Road 7, Suite 382, Coconut Creek FL 33073
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/26/2007 Document number: N06325
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)

Bogen Law Group, P.A.

1900 Glades Road, Suite 300

Boca Raton, FL 33431

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

Guy M. Shir, Esq.

1800 NW Corporate Boulevard, Suite 200

P.O. Box NOT acceptable

Boca Raton, FL 33431

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.

Ricardo Silva
Signature of an officer or director

Ricardo Silva, 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]
Signature of Registered Agent

October 17, 2014

Date

If signing on behalf of an entity:

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 (03/12)

14 NOV 21 PM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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