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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

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SUBJECT: The Dorado At Hamptons West Condominium Association, Inc. Name of Corporation

# DOCUMENT NUMBER: N06806

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:

Michael Bogen	
Name of Contact Person	
Bogen Law Group, P.A.	
Firm/Company	
7351 Wiles Rd. Ste. 202	
Address	
Coral Springs, FL 33067	
City/State and Zip Code	

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

For further information concerning this matter, please call:

Michael Bogen	at $(954)^{525-0751}$
Name of Contact Person	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** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

1. The name of the corporation: The Dorado At Hamptons West Condominium Association, Inc.

2. The principal office address: 8030 Hampton Blvd

North Lauderdale, FL 33068

3. The mailing address (if different):

4. Date of incorporation/qualification: 12/26/1984 Document number: N06806

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)

Tri-County Property Services & Management

1451 W. Cypress Creek Rd. Ste. 300

Ft. Lauderdale, FL 33309

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

	Bogen Law Group, P.A.	
	7351 Wiles Rd. Ste. 202	
	P.O. Box_NOT acceptable	
	Coral Springs, FL 33067	
as changed v	ddress of its registered office and the street address of the business off will be identical.	

Such change was autorized 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.

re of an officer or director

Viergina Garcon, 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. Thereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

5/28/2021

Date

If signing on behalf of an entity:

Michael Bogen

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)