N0700000853

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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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SECRETARY OF STATE

APPROVED AND FILFO

C. LEWIS

DEC 20,2013

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 10, 2013

EDWARD DICKER, ESQ. / DICKER KRIVOK & STOLOFF, PA 1818 AUSTRALIAN AVE SOUTH SUITE 400 WEST PALM BEACH, FL 33409 US

SUBJECT: MARINER COURT CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N0700000853

We have received your document for MARINER COURT CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 713A00028017

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MARINER COURT CONDOMINIUM ASSOCIATION, INC. (Name of Corporation)
DOCUMENT NUMBER: N0700000853
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:
EDWARD DICKER, ESQUIRE
(Name of Contact Person)
DICKER, KRIVOK & STOLOFF, P.A.
(Firm/Company)
1818 Australian Avenue South, Suite 400 (Address)
West Palm Beach, FL 33409
(City/State and Zip Code) For further information concerning this matter, please call:
EDWARD DICKER. ESOUIRE at (561) 615-0123 (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO:

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	the corporation: MARINER COURT CONDOMINIUM ASSOCIATION, INC.	
2. The principal of	office address 229 Mariner Court, North Palm Beach, FL 33408	
3. The mailing ac	address (if different): Marsines court c/o Trademark ty Mars rement P.O. for 14172 N.P.B. F1 33	op.
4. Date of incorp	poration/qualification: 01/24/2007 Document number: N0700000853	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Hilley-& Wyant-Cortez, P.A.	
	860 U.S. Highway One	
	North Palm Beach, FL 33408	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	FILED
	1818 Australian Avenue South, Suite 400	
	(P.O. Box NOT acceptable)	
	West Palm Beach, FL 33409	
The street addre	ress of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Joseph So	JACKS ON L. Blanton, President (Printed or typed name and wile)	+
I hereby accept I further agree to of my duties, an document is being corporation has	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ring filed merely to reflect a change in the registered office address, I hereby confirm that the so been notified in writing of this change.	
Flan I	11/14/13	
(Sig	rigniture of Registered Agent) (Date)	
If signing on be	ehalf of an entity:	
Dicker	Krivok + Stoleff (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 (8/05)