

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:  Special Instructions to Filing Officer:  With Michael Michael Michael Ho Add  Special Instructions to Filing Officer:  With Michael Michael Michael Holder Add  Special Instructions to Filing Officer:  With Michael
Mr. A

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S. TALLENT FEB 1 5 2017

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## **COVER LETTER**

SUBJECT: Lauderdale Beach Cluster Homes Association, Inc  Name of Corporation	
DOCUMENT NO 7000003808	NUMBER:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fi	ling.
Please return all correspondence concerning this matter to the following:	
MICHAEL W. MCDERMOT	7"
MCDERNOTT HOLDINGS, INC. Firm/Co	ompany
2805 E.OAKLAND PK. Blud,	<del></del>
FORT LAUDERDALE, FL 33 City/State and Zip Code	306
MIKE @ MY LUXURY VACHTS  E-mail address: (to be used for future annual report notification)	, COM

Name of Contact Person

For further information concerning this matter, please call:

TO:

Amendment Section
Division of Corporations

MON at (954), 557-3777

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
Corporations P.O. Box 6327
Tallahassee, FL 32314

## **Street Address:**

Amendment Section
Division of
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

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

FOR CORPORATIONS	
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida statement of change is submitted for a corporation organized under the laws of the State of	Statutes, this
in order to change its registered office or registered agen	t or hoth in the
State of Florida.	i, or both, the inc
1. The name of the corporation: LAUNERDALE BEACH CLUSTE  2. The principal office address:  ASSOCIATION, I	a HOMES
2. The principal office address:_	-NC,
L805 E.DAKLAND PIC KURI	
FORT LAUTENALE, FL 33306  3. The mailing address (if different):	
N/A	
4. Date of incorporation/qualification: 04/16/2007 Document number: NO70	10000 3808
5. The name and street address of the current registered agent and registered office on file w Florida Department of State: (If resigned, enter resigned)	ith the
George W Gilbert	17 F
2201 NE 22nd Terrace	FILED BASSEE, FI
Ft Landerdale, Pl 33305	W 4:21
6. The name and street address of the new registered agent (if changed) and /or registered of changed):	fice (if
MICHAEL W. MCDERHOTT	
2805 E. OAKLAND PK Blud.	

F.T. LAUD -P.O. Box NOT acceptable

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.

Standure of an officer of director

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 of Registered Agent

5/2017

Date

If signing on behalf of an entity:

MICHAEL W. MC DEFMOTT

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)