

NO7608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

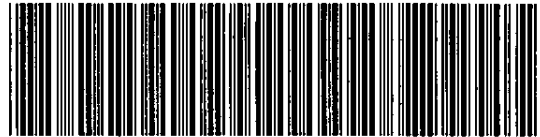
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 NOV 23 AM 9:25

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CLERK OF STATE
CORPORATIONS

T Roberts NOV 25 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 12, 2009

BRIDGETTE E. BONET, ESQ.
ASSOCIATION LAW GROUP, P.L.
1666 KENNEDY CAUSEWAY, STE 305
NORTH BAY VILLAGE, FL 33141

SUBJECT: SOUTHBRIDGE HOMEOWNERS' ASSOCIATION, INC.
Ref. Number: N07608

We have received your document for SOUTHBRIDGE HOMEOWNERS' 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 document must have original signatures.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 909A00035343

9/21/13

2009 NOV 23 AM 8:00

FLORIDA DEPARTMENT OF STATE
ASSESSOR OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Southbridge Homeowners' Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N07608

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:

Bridgette E. Bonet, Esq.
Name of Contact Person

Association Law Group, P.L.
Firm/Company

1666 Kennedy Causeway, Suite 305
Address

North Bay Village, Florida 33141
City/State and Zip Code

bbonet@algpl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bridgette E. Bonet at (305) (305) 938-6922 Ext.140
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

**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: Southbridge Homeowners' Association, Inc.

2. The principal office address: 2950 N. 28 Terrace, Hollywood, Florida 33020

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/13/1985 Document number: N07608

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)

Siegfried, Rivera, Lerner, De La Torre & Sobel

201 Alhambra Circle, Suite 1102

Coral Gables, Florida 33134

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

Association Law Group, P.L.

1666 Kennedy Causeway, Suite 305

P.O. Box NOT acceptable

North Bay Village, Florida 33141

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.

See attached

Signature of an officer or director

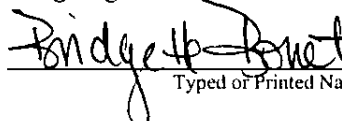
Printed or typed name and title

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

10/01/09
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

RECEIVED
DIVISION OF CORPORATIONS
NOV 09 9:25 AM

for Officer Signature Only
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P.O. Box NOT acceptable

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Edward V. Chmely
Signature of an officer or director

Edward V. Chmely, President
Printed or typed name and title

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[Signature]
Signature of Registered Agent

10/01/09
Date

If signing on behalf of an entity:

Bridgett Bonet
Typed or Printed Name

*** FILING FEE: \$35.00 ***

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MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314