

(Requestor's Name)				
(Ac	ddress)			
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(Ĉi	ty/State/Zip/Phone	: #)		
☐ SICK-NS	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer.				
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

THE FOUNTAINS ON OCEAN BOULEVARD CONDOMINIUM ASSOCIATION, INC.

Name of Corporation

DOCUMENT NUMBER: NO800009200

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:

## DANIEL WASSERSTEIN Name of Contact Person WASSERSTEIN, P.A. Firm/Company 301 YAMATO ROAD, SUITE 2199 Address BOCA RATON, FL 33431

danw@wassersteinpa.com

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

City/State and Zip Code

For further information concerning this matter, please call:

DANIEL WASSERSTEIN
Name of Contact Person
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

	provisions of sections 607.0502, inge is submitted for a corporation		·
in orde	r to change its registered office o	or registered agent, or both, in	the State of Florida.
1. The name of	the corporation: THE FOUNTAIN	S ON OCEAN BOULEVARD C	ONDOMINIUM ASSOCIATION, INC
2. The principal	office address: 2409 N. OCE	AN BLVD, #326, FOR	T LAUDERDALE, FL 3330
3. The mailing a	address (if different): N/A		
4. Date of incorp	poration/qualification: 10/2/20	)08 Document num	<sub>oer:</sub> N08000009200
5. The name and	I street address of the current reg rtment of State: (If resigned, ente	istered agent and registered of	fice on file with the
	RACHEL E. FRYDMAN	N, ESQ.	
	9825 MARINA BOULE	VARD, STE 100	
	BOCA RATON, FL 334	28	202. SA
6. The name and street address of the new regi (if changed):		red agent (if changed) and /or	registered office
	WASSERSTEIN, P.A.		
301 YAMATO ROAD, SUITE 2199			
P.O. Box NOT acceptable			_
	BOCA RATON, FL 334	-31	
The street address changed will	ess of its registered office and the be identical.	e street address of the busines	ss office of its registered agent,
Such change was authorized by th	as authorized by resolution duly ne board, or the corporation has	adopted by its board of direct been notified in writing of the	ors or by an officer so change.
		f the Board of Directors	
I further agree of agent Or, if the	the appointment as registered a comply with the provisions of my duties, and I am familiar with the corporation has been nature of Registered Agent	gent and agree to act in this a all statutes relative to the pro th and accept the obligation of y to reflect a change in the re	pper and complete f my position as registered gistered office address, l
If signing on be	half of an entity:		
	ASSERSTEIN		
T	yped or Printed Name	_	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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