N09000010518

	(Requestor's Name)		
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COVER LETTER

Division of Corporations				
Ocean Residences at Boca Beach Club Condominium Association, Inc.				
Name of Corporation				
DOCUMENT NUMBER: N09000010518				
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:				
Roberto C. Blanch, Esq.				
Name of Contact Person				
Siegfried Rivera				
Firm/Company				
201 Alhambra Circle, 11th Floor				
Coral Gables, FL 33193 City/State and Zip Code				
rblanch@siegfriedrivera.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call: Pohorto C. Blanch, Esq. 305, 442, 2334				
Roberto C. Blanch, Esq. at (305) 442-3334 Area Code & Daytime Telephone Number				
Name of Confact 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				
runanassec, 15 22514 2001 Excentive Center Chefe				

Tallahassee, FL 32301

TO: Amendment Section

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

Pursuant to the provisions of sections 607.0502, 61 statement of change is submitted for a corporation	organized under the laws of the State of Florida	rhis
In order to change its registered office or in the name of the corporation: Ocean Residence	registered agent, or both, in the State of Florida. ces at Boca Beach Club Condominium Ass.	ociation Inc
1. The name of the corporation:	p Poulovard Poop Poten Florida 22	422
2. The principal office address: 1000 S. Ocea	n boulevard, boca Raton, Florida 334	432
3. The mailing address (if different):		
4. Date of incorporation/qualification: 10/28/20	009	18
5. The name and street address of the current regist Florida Department of State: (If resigned, enter regist)	ered agent and registered office on file with the	
Siegfried Rivera Lerner [De La Torre & Sobel	
201 Alhambra Circle, Ele	eventh Floor	<i>~</i> ;
Coral Gables, FL 33134	-	E- 2019 OCT
6. The name and street address of the new registere (if changed):	ed agent (if changed) and /or registered office	-7
SKRLD, Inc.		
201 Alhambra Circle, #1		39
Р.О.В. Coral Gables, FL33134	ox NOT acceptable	
The street address of its registered office and the sas changed will be identical.	street address of the business office of its register	ed agent,
Such change was authorized by resolution duly ad authorized by trade authorized by trade authorized by the corporation has be	dopted by its board of directors or by an officer so en notified in writing of the change.)
Signalare to another or director	Printed of typel name and title	Treasurer
I hereby accept the appointment as registered ago I further agree to comply with the provisions of al performance of my duties, and I am familiar with agent. Or, if this document is being filed merely t hereby confirm that the comporation has been noti	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as regis to reflect a change in the registered office addres, ified in writing of this change	tered s, l
Signature of Registered Agent	10/1/19 Date	
He 410 De La Torre Typed or Printed Name		

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