

N 11618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

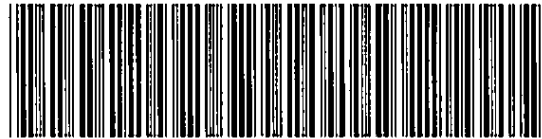
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SECRETARY OF STATE
TALLAHASSEE, FL

C. GOLDEN

OCT 29 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Shores at Wellington No. II Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N11618

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:

Christopher A. Sajdera, Esq.

Name of Contact Person

Sajdera Kim PLLC

Firm/Company

2200 NW Corporate Blvd., Suite 210

Address

Boca Raton, FL 33431

City/State and Zip Code

cas@sk-attorneys.com

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

For further information concerning this matter, please call:

Christopher A. Sajdera

Name of Contact Person

at (561) 948-0650

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 21, 2018

CHRISTOPHER A. SAJDERA, ESQUIRE
2200 NW CORPORATE BOULEVARD
SUITE 210
BOCA RATON, FL 33431

SUBJECT: THE SHORES AT WELLINGTON NO. II CONDOMINIUM
ASSOCIATION, INC.
Ref. Number: N11618

We have received your document and check(s) totaling \$355.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 818A00012998

RECEIVED
2018 OCT 23 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FL

CK # 10380 \$355.00 CASHED

**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: The Shores at Wellington No. II Condominium Association, Inc.
2. The principal office address: c/o Davenport Professional Property Management, Inc.
6620 Lake Worth Road, Suite F, Lake Worth, FL 33467
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/16/1985 Document number: N11618

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)

Sajdera, Christopher

3335 NW Boca Raton Blvd.

Boca Raton, FL 33431

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

Christopher A. Sajdera, Esq.

2200 N.W. Corporate Blvd., Suite 210

P.O. Box NOT acceptable

Boca Raton, FL 33431

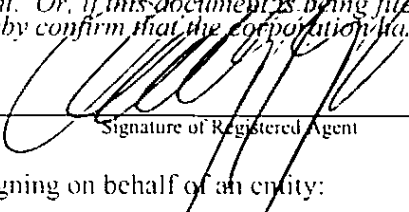
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

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

10/15/18

Date

If signing on behalf of an entity:

Christopher A. Sajdera, Esq.

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

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TALLAHASSEE, FL