N12 000004687

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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A. Butter

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Tuscany Property Owners Association	. Inc.
Name of Corporation	<u> </u>
DOCUMENT NUMBER: N12000004687	
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:
Lissette Vasquez, Property Manager	
Name of Contact Person	
Castle Group, Inc.	
Firm/Company	
14001 Gold Tigereye Trail	
Address	
Delray Beach, Florida 33446	
City/State and Zip Code	
ivasquez@castlegroup.com	
E-mail address: (to be used for future annual	freport notification)
For further information concerning this matter, p	please call:
Lissette Vasquez, Property Manager	at (561 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Name of Contact Person	at (561)404-9261 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2F045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\frac{\text{Fl}}{\text{Fl}}$ or to change its registered office or registered agent, or both, in the State of Flance	orida	s 	
1. The name of	the corporation. Tuscany Property Owners Association, Inc.			
2. The principal	office address: 14001 Gold Tigereye Trail, Delray Beach, Florida 33446			
3. The mailing:	address (if different):			-
4. Date of incor	poration/qualification: 05/08/2012 Document number: N1200000	1687 —		_
5. The name an	d street address of the current registered agent and registered office on file wit rtment of State: (If resigned, enter resigned)			
	Glazer & Sachs, P.A.	12 141	202	
	3113 Stirling Rd, Suite 201	345	IUL E	
	Fort Lauderdale, FL 33312	7-7-	9-1	-\$27232 *99727.5 }
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered offi	OF ST	PH 1: 09	O
	Randall K. Roger & Associates, P.A.		9	
	621 NW 53rd Street, Suite 300			
	P.O. Box NOT acceptable			
	Boca Raton, Florida 33487			
The street addr as changed wil	ress of its registered office and the street address of the business office of its I be identical.	registere	d agent.	•
Such change wanthorized by	ras authorized by resolution duly adopted by its board of directors or by an the board, or the corporation has been notified in writing of the change.		_	
(Signal	inspired and interior director Country or dire			
I hereby accept further agree of my duties, a document is be corporation had	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and com and I am familiar with and accept the obligation of my position as registered in filed merely to reflect a change in the registered office address, I herebas been polified in writing of this change.	plete perf l agent. (y confirm	formanc Or, if thi that the	e S Z
	ignature of Registered Agent A. Royal Ast Paper 15, 2021			
	pehalf of an entity:			
Randall K. Ro	ger, Esq.			
	Typed or Printed Name			

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