NH000001528

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
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J. HORNE APR 10 2024





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03/19/24--01028--020 **35.00



COVER LETTER

TQ: Amendment Section Division of Corporations Madison Place of Pompano Beach Homeowners' Association, Inc. SUBJECT: Name of Corporation N14000001528 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: Steven S. Valancy Name of Contact Person Valancy & Reed, P.A. Firm/Company 310 SE 13 Street Address Ft. Lauderdale, Florida 33316 City/State and Zip Code general@myflalaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Steven S. Valancy Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations **Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (03/12)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of che	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Madison Place of Pompano Beach Homeowners' Association, Inc.
2. The principal	office address: c/o Association Management Partners, LLC, 2436 N. Federat Hwy PMB 205, Lighthouse Point, FL 33064-6854
3. The mailing a	nddress (if different):
4. Date of incor	poration/qualification: 07/25/2014 Document number: N14000001528
	d street address of the current registered agent and registered office on file with the rument of State: (If resigned, enter resigned)
	Association Management Partners, LLC
	2436 N. Federal Hwy PMB 205
	Lighthouse Point, FL 33064-6854
6. The name and (if changed):	Valancy & Reed, P.A. 310 SE 13 Street
	Valancy & Reed, P.A.
	310 SE 13 Street
	P.O. Box NOT acceptable
	Fort Lauderdale, Florida 33316
The street address changed will	ess of its registered office and the street address of the business office of its registered agent,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so no board, or the corporation has been notified in writing of the change.
14	Laura Giardi Printed or typed name and title
Signation	re of auxiliacer or director Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	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 complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
	nature of Registered Avent Date
Sig	nature of Registered Agent Date
If signing on be	half of an entity:
Steven S. \	
יוי	ypcd or Printed Name * * * FILING FEE: \$35.00 * * *