N/6000006594

•		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: WATER CLUB NORTH PALM BEAC Name of Corporation	H MASTER ASSOCIATION, INC.
DOCUMENT NUMBER: N16000006594	
The enclosed Statement of Change of Registered	l Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	matter to the following:
JONATHAN GOLDSTEIN	
Name of Contact Person	•
HABER LAW	
Firm/Company	•
251 NW 23 STREET	
Address	
MIAMI, FL 33127	
City/State and Zip Code	
JGOLDSTEIN@HABER.LA	\W
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, p	please call:
JONATHAN GOLDSTEIN	at (305) 379-2400 Area Code & Daytime Telephone Numb
Name of Contact Person	Arca Code & Daytime Telephone Numb

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

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

Turidina of the second

CR2E045 (04/13)

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

statement of cha	mge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes on organized under the laws of the State of FLORW or registered agent, or both, in the State of Florida.	-
		NORTH PALM BEACH MASTER ASSOCIATION,	INC.
2. The principal	office address: 2 Water Club Way	y North Palm Beach, FL 33408	
3. The mailing a	address (if different): 2 Water Ch	ib Way Attn: Management Office North Palm Beach, F	L 33408
		Document number: N16000006594	
	d street address of the current regramment of State: (If resigned, ente	istered agent and registered office on file with the resigned)	
	Konyk & Lemme PLLC		202
	140 INTRACOASTAL POINTE	DR 310	1022 NOV
	Jupiter, FL 33477		-1
6. The name and (if changed):	d street address of the new registe	cred agent (if changed) and /or registered office ()	AM II: 5
	HABER LAW	[·	$\frac{5}{3}$
	251 NW 23 STREET		
	MANA PL 22127	P.O. Box NOT acceptable	
	MIAMI, FL 33127		
The street address changed will	ess of its registered office and the identical.	ne street address of the business office of its regist	cred agent,
Such change wa	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an officer been notified in writing of the change.	SO
- Kolul	re of an officer of director	Robert B. Mang	
I hereby accept I further agree of my duties, an document is bei corporation bas	the appointment as registered of to comply with the provisions of ad I am familiar with and accept ing filed merely to reflect a char s been notified in writing of this	igent and agree to act in this capacity. fall statutes relative to the proper and complete p t the obligation of my position as registered agent, uge in the registered office address, I hereby confi	erformance Or, if this rm that the
Jonathan i		9/21/2022	
CF676D5E3F4C4C Sig	nature of Registered Agent	Date	
If signing on bo	half of an entity:		
Jonathan	Goldstein		
T	yped or Printed Name	- <u>-</u>	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)