

| | (Requestor's Name) |
|----------------------|--------------------------|
| | (Address) |
| | (Address) |
| | (City/State/Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| | (Business Entity Name) |
| - | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | to Filing Officer: |
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COVER LETTER

| TO: Amendment Section Division of Corporations | |
|---|---|
| SUBJECT: Old Marsh Golf Club, Inc. Name of Corporation | |
| DOCUMENT NUMBER: N17821 | |
| 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: | |
| Marcy Moore Name of Contact Person | |
| Old Marsh Golf Club Firm/Company | |
| 7500 Old Marsh Rd | |
| Palm B-each Gardens, FL 3341 City/State and Zip Code | 8 |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| abone | |
| Name of Contact Person at (| |
| 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

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: Old Marsh Golf Club, Inc. | |
| 2. The principal office address: 7500 Old Marsh Rd. | |
| Palm Brach Gardens, FL 33418 | |
| 3. The mailing address (if different): Same | |
| | |
| 4. Date of incorporation/qualification: 11-18-1986 Document number: N 17821 | |
| 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) | |
| Michael Gibson | |
| 7500 Old Marsh Rd. | |
| Palm Beach Gardens, FL 33418 | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | |
| Michael Menery | |
| 7500 old Marsh Rd To P.O. Box NOT acceptable | |
| Palm Beach Gardens, FLE, 33418 | |
| 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. | |
| Harvey Golub President Signature of an officer or director Harvey Golub President Trinted 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 12-19-17 Date | |
| If signing on behalf of an entity: | |
| Michael Menery Typed or Printed Name | |

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