

N18718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

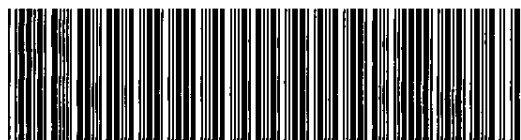
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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R.A. RO/CHS
10/11/3/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Fairmont Place Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N18718

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:

Joshua Gerstin, Esq.
Name of Contact Person

Gerstin & Associates
Firm/Company

40 S.E. 5th Street, Suite 610
Address

Boca Raton, FL 33432
City/State and Zip Code

lisa@gerstin.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Kochlary / Joshua Gerstin, Esq. at (561) 750-3456
Name of Contact Person 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

October 25, 2011

JOSHUA GERSTIN, ESQ.
GERSTIN & ASSOCIATES
40 S.E. 5TH STREET - SUITE 610
BOCA RATON, FL 33432

SUBJECT: FAIRMONT PLACE HOMEOWNERS' ASSOCIATION, INC.
Ref. Number: N18718

We have received your document for FAIRMONT PLACE HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name and capacity of the person signing on behalf of the new registered agent.

YOU HAVE LISTED THE CORPORATE NAME IN IN THE SPACE WHERE THE CAPACITY OF THE PERSON WHO IS SIGNING THE FORM ON BEHALF OF THE NEW REGISTERED AGENT.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 711A00024390

RECEIVED

11 NOV -3 AM 11:17

REGULATORY DIVISION
TALLAHASSEE, FLORIDA

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: Fairmont Place Homeowners Association, Inc.
2. The principal office address: c/o Associates Property Management
1928 Lake Worth Road, Lake Worth, FL 33461
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/13/1987 Document number: N18718
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)

Becker & Poliakoff, P.A.

625 North Flagler Drive, 7th Floor

West Palm Beach, FL 33401

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

Gerstin & Associates

40 S.E. 5th Street, Suite 610

P.O. Box NOT acceptable

Boca Raton, FL 33432

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.

Sheldon Kane
Signature of an officer or director

Sheldon Kane / President
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]
Signature of Registered Agent

October 20, 2011
Date

If signing on behalf of an entity: Joshua Gerstin, Esq.

Fairmont Place Homeowners Association
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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV -3 PM 12:27