

N119588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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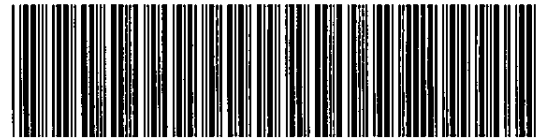
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Mayfair at Jacaranda Homeowners Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N19588

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:

Amanda Geus

Name of Contact Person

Atlantis Management Services, LC

Firm/Company

11011 Sheridan Street, Suite 208

Address

Cooper City, FL 33026

City/State and Zip Code

amanda@atlantis-management.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheryl Levin

Name of Contact Person

at ( 954 ) 742-9034

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

**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: Mayfair at Jacaranda Homeowners Association, Inc.
2. The principal office address: c/o Atlantis Management Services  
11011 Sheridan Street, Suite 208, Cooper City, FL 33026
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/09/1987 Document number: N19588
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)

Marc Rodriguez

c/o Association Services of Florida

10112 USA Today Way, Miramar, FL 33025

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

Cheryl J. Levin, P.A.

Courtyard Business Center

P.O. Box NOT acceptable

4694 NW 103 Avenue, Sunrise, FL 33351

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.

Ronnie Heller  
Signature of an officer or director

Ronnie Heller  
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.*

Cheryl J. Levin  
Signature of Registered Agent

12/29/16  
Date

If signing on behalf of an entity:

Cheryl J. Levin  
Typed or Printed Name

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