

N21065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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2023 JUL -6 PM 3:00

SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COUNTRY HOMES AT EMERALD FOREST HOMEOWNERS' ASSOCIATION
Name of Corporation

DOCUMENT NUMBER: N21065

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:

Michael E. Chapnick, Esq.
Name of Contact Person
Sachs Sax Caplan
Firm/Company
6111 Broken Sound Parkway, N.W., Suite 200
Address
Boca Raton, FL 33487
City/State and Zip Code
mehapnick@ssclawfirm.com

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

For further information concerning this matter, please call:

Michael E. Chapnick at (561) 237-6825
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 JUN -5 PM 3:00
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SECRETARY OF STATE

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: Country Homes at Emerald Forest Homeowners' Association, Inc.

2. The principal office address: 4000 57th Avenue, Suite 101, Lake Worth, FL 33463

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/09/1987 Document number: N21065

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)

Allan Ziker
13300 Opal Lane
Wellington, FL 33414

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

Associated Corporate Services, LLC
6111 Broken Sound Parkway, N.W., Suite 200
Boca Raton, FL 33487
P O Box NOT acceptable

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.

Allan Ziker
Signature of an officer or director

Allan Ziker - 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

6/29/2023
Date

If signing on behalf of an entity:

Michael Chajnick
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

2023 JUN -5 PM 8:00
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