## N23885

(Re	equestor's Name)		
(Ac	idress)		
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(Ci	ty/State/Zip/Phone	e #}	
PICK-UP	☐ WAIT	MAIL	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Las Olas Beach Club of Cocoa Beach Association, Inc.
Name of Corporation
DOCUMENT NUMBER: N23885
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:
The state of the s
Pohogos Matou
Rebecca Matey  Name of Contact Person
Name of Confact Person
Las Olas Beach Club of Cocoa Beach Assoc., Inc.
5100 Ocean Beach Blvd.
Address
Cocoa Beach, FL 32931
City/State and Zip Code
lasolas@beachclubs.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rebecca Matey 321 \ 784-2706 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Rebecca Matey  at ( 321 ) 784-2706  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

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flor ange is submitted for a corporation organized under the laws of the State $\sigma$ to change its registered office or registered agent, or both, in the State	of Florida	_	
1. The name of t	the corporation: Las Olas Beach Club of Cocoa Bea	ich Associa	tion,	In
2. The principal	office address: 5100 Ocean Beach Blvd.			_
	Cocoa Beach, FL 32931			_
3. The mailing a	address (if different):			_
4. Date of incorp	poration/qualification: 1987 Document number: N2	23885		_
	d street address of the current registered agent and registered office on fil rtment of State: (If resigned, enter resigned)	le with the		
	Thomas W. Matey, Sr.			
	5100 Ocean Beach Blvd.			
	Cocoa Beach, FL 32931			
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registere	d office	9	
	Rebecca Matey		1 3 3 6	• የኒ ግን
	same			
	P.O. Box NOT acceptable		22 %	活門
			PH	(유) (개)
The street address changed will	ess of its registered office and the street address of the business office (be identical.	of its registered as	gelin.	
^ .	as authorized by resolution duly adopted by its board of directors or by he board, or the corporation has been notified in writing of the change.	an officer so	2	2
Klec	Ca Matty Rebecca Matey, V Printed or typed name a	.P. & Secre	<u>et</u> ary	
I further agrée i performance of agent. Or, if thi	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and for duties, and I am familiar with and accept the obligation of my possis document is being filed merely to reflect a change in the registered of that the corporation has been notified in writing of this change.	ition as registerea	1	
Rebe	ecca Matty 12/19/17 pature of Registered Agent Date			
Sign	nature of Registered Agent Date			
If signing on be	chalf of an entity:			
	yped or Printed Name			

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