N24050

(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:				
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status				
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Office Use Only



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RIALIX

COVER LETTER

Amendment Section Division of Corporations TO:

KEYSTONE CONDOMINIUM ASSOCIATION, INC. Name of Corporation

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:

RENEE RENUART

Name of Contact Person

WASSERSTEIN, P.A.

Firm/Company

301 YAMATO ROAD, SUITE 2199

BOCA RATON, FL 33431

City/State and Zip Code

danw@wassersteinpa.com

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

For further information concerning this matter, please call:

RENEE RENUART

Name of Contact Person

561 288-3999
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

CR2E045 (03/12)

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

statement of cha	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of FLORIDA	
in orde	der to change its registered office or registered agent, or both, in the State of Florida.	
	of the corporation: KEYSTONE CONDOMINIUM ASSOCIATION, INC.	
	PALOFFICE Address: C/O CAMPBELL PROPERTY MANAGEMENT	
	PLEWOOD DRIVE, #23, JUPITER, FL 33458	
3. The mailing a	g address (if different): N/A	- <u></u>
4. Date of incor	orporation/qualification: 12/22/1987 Document number: N24050	
The name and Florida Depart	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	
	GARY FIELDS, ESQ.	
	4440 PGA BOULEVARD, SUITE 308	ر _{حم}
	PALM BEACH GARDENS, FL 33410	020 H
6. The name and (if changed):	and street address of the new registered agent (if changed) and for registered office	2020 HAR 30
	WASSERSTEIN, P.A.	呈
	301 YAMATO ROAD, SUITE 2199	AH 11: 36
	P.O. Box NOT acceptable BOCA RATON, FL 33431	ð
775 1 t		
	dress of its registered office and the street address of the business office of its registered ill be identical.	agent,
Such change we authorized by the	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	/ i
Signatu	after of an officer or director Printed or typed name and title	popos
I hereby accept I further agree performance of agent. Or, if th hereby confirm	pt the appointment as registered agent and agree to act in this capacity. the to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as register this document is being filed merely to reflect a change in the registered office address, I my that the corporation has been notified in writing of this change.	l ed
William !	1/ 1/ 3/5/20	
1,	behalf of an entity:	_
RENEE RE	•	
	Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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