## N24308

(Red	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	//State/Zip/Phone	e #)	
PICK-UP	MAIT WAIT	MAIL	
(Bus	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



100274323831

06/26/15--01007--017 \*\*35.00



Robert Rubinstein, Esq. Office Managing Shareholder Phone: (561) 820-2866 Fax: (561) 832-8987 rrubinstein@bplegal.com

Bank of America Centre 625 N. Flagler Drive, 7th Floor West Palm Beach, Florida 33401

June 22, 2015

## VIA REGULAR U.S. MAIL

Corporate Records Bureau Divisions of Corporations Department of State P.O. Box 6327 Tallahassee, FL 32314

Re: Mizner Court Condominium Association, Inc.

Statement of Change of Registered Office or Agent or Both for Corporations

Dear Sir or Madam:

Enclosed please find the executed Statement of Change of Registered Office or Registered Agent form for the above-reference Association, as well as a check in the amount of \$35.00 to cover the filing fee cost.

If you have any questions or require anything further, please do not hesitate to contact me. Thank you in advance for your prompt attention to this matter.

Sincerely,

Robert Rubinstein

For the Firm

RR/asm Enclosure

cc:

Board of Directors (via email)

ACTIVE: 7237656\_1

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Mizner Court Condominium Association, Inc.

Name of Corporation

DOCUMENT NUMBER N24308

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:

Robert Rubinstein, Esq.

Name of Contact Person

Becker & Poliakoff, P. A.

Firm/Company

625 N. Flagler Dr., 7th Floor

Address

West Palm Beach, FL 33401

City/State and Zip Code

rrubinstein@bplegal.com

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

For further information concerning this matter, please call:

Robert Rubinstein, Esq.

,561 \6t

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

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	his ———	
1. The name of	the corporation: Mizner Court Condominium Association, Inc.		
2. The principal	office address: 100 SE 5th Ave., Boca Raton, FL 33432		-
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 1/12/1988 Document number: N24308		
5. The name and	d street address of the current registered agent and registered office on file with the urtment of State: (If resigned, enter resigned)		
	RANDALL K. ROGER AND ASSOCIATES, P.A.		
	621 NW 53 ST., STE 300		
	BOCA RATON, FL 33487		
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	NOT SE	DIVISION
	Becker & Poliakoff, P.A.	N 26	ETAR F OF (
	Attn: Robert Rubinstein, Esq.	70	ORF YED
	P.O. Box NOT acceptable	<del></del>	93.00 A.A.
	625 N. Flagier Dr., 7th Floor, West Palm Beach, FL 33401	ဍ	され
The street address changed will	ess of its registered office and the street address of the business office of its registere I be identical.	d agent	775 *
Such change w authorized by t	as 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.		
Maryon	tire of an officer or director Like he and agree to act in this capacity.	VK	esplent
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t 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 complete f my duties, and I am familiar with and accept the obligation of my position as regist his document is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change.	ered , I	
Kole	grature of Registered Agent Date		
·	ehalf of an entity:		
Becker & Po	oliakoff, P.A.		
7	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 \* \* \*