NA6506

(Re	equestor's Name)			
(Ac	ddress)			
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(At	udiess)			
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Bi	usiness Entity Nan	ne)		
(2.	asiness Entity Hair	nc,		
(Do	ocument Number)			
Certified Copies	Certificates	Certificates of Status		
Special Instructions to	Filing Officer:			





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15 JAN 26 PM 4: 20
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

FE304 2015

COVER LETTER

Amendment Section Division of Corporations SUBJECT: Watersedge at the Lakes of Delray Condo E Ass'n Inc Name of Corporation N26506 DOCUMENT NUMBER: 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: DANIEL WASSERSTEIN Name of Contact Person WASSERSTEIN, P.A. Firm/Company 6501 CONGRESS AVENUE, SUITE 100 Address BOCA RATON, FL 33487 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: DANIEL WASSERSTEIN at (561) 288-3999
Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Amendment Section **Mailing Address:** Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

TO:

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

statement of cha	provisions of sections 60 ange is submitted for a co er to change its registered	rporation organizea	l under the laws of the Si	tate of FLORIDA	
1. The name of t	the corporation: Water	sedge at the l	_akes of Delray (Condo E Ass'n, Inc.	<u></u>
	office address: FIRSTS			3290	—
3. The mailing a	address (if different): N//	A			_
4. Date of incorp	poration/qualification:	05/19/1988	_ Document number:	N26506	
	I street address of the cur timent of State: (If resign		and registered office on	file with the	
	HARTLEY & MOR	TON ATTORNE	YS AT LAW PA		
	800 VILLAGE SQUARE CROSSING, #222				
	PALM BEACH GA	RDENS, FL 334	10		
6. The name and (if changed):	street address of the nev	v registered agent (if	changed) and /or registe	15 JAN 26 SECRETAR'S TALLAHASS	
	WASSERSTEIN, F	² .A.		ARETV AHA	(
	6501 CONGRESS AVENUE, SUITE 100 P.O. Box NOT acceptable				
	P.O. Box NOT acceptable			of St	
The street addre	BOCA RATON, FL	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' 	race of the business offi		2
				ce of its registered	
Such change was authorized by the	is authorized by resoluti ne board, by the corporat	on duly adopted by ion has been notifie	its board of directors or ed in writing of the char	r by an officer so nge.	
Palal	1 lill		Presiden	7	
l hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as regite comply with the provided I am familiar with and familiar with and filed merely to reflect pean notified in writing the Registered Agent	stered agent and as sions of all statutes I accept the obligat I a change in the re of this change	Printed or typed no pree to act in this capace relative to the proper a ion of my position as registered office address,	ity. ity. ind complete performance gistered agent. Or, if this I hereby confirm that the	
f signing on bel	half of an entity:				
	EL WASSERSTEIN uped or Printed Name	<u> </u>			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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