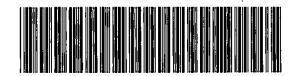


(Requ	estor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
BAYSIDE VILLAGE EAST CONDOMINIUM ASSOCIATION, INC.		
Name of Corporation		
DOCUMENT NUMBER: N26952		
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:		
Patrice Lawson  Name of Contact Person		
PeytonBolin, PL		
Firm/Company		
3343 West Commercial Blvd, Suite 100		
Address		
Fort Lauderdale, FL 33309		
City/State and Zip Code		
support@peytonbolin.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Patrice Lawson  Name of Contact Person  at (954 316-1339)  Area Code & Daytime Telephone Number		
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  Street Address: Amendment Section		

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (03/12)

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

	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of Florida	
	der to change its registered office or registered agent, or both, in the State of Florida.	
I. The name o	of the corporation: BAYSIDE VILLAGE EAST CONDOMINIUM ASSOCIATION,	INC
2. The princip	pal office address: 42205 FISHER ISLAND DR FISHER ISLAND, FL 33109	
3. The mailing	g address (if different): 42205 FISHER ISLAND DR FISHER ISLAND, FL 331	109
4. Date of inco	corporation/qualification: 06/15/1988 Document number: N26952	
	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	
	SPIEGELMAN, GUY ESQ	
	19 WEST FLAGLER STREET SUITE 912	
	MIAMI, FL 33130	
6. The name a (if changed)	and street address of the new registered agent (if changed) and /or registered office	1
	PEYTONBOLIN, PL	7
	3343 WEST COMMERCIAL BLVD, SUITE 100	j
	P.O. Box NOT acceptable	
	FORT LAUDERDALE, FL 33309	-
	dress of its registered office and the street address of the business office of its registered agent, ill be identical.	2
Such change vauthorized by	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.	
Signa	IRWIN POTASH PRESIDENT	
l further agrée performance o agent. Or if t	pt the appointment as registered agent and agree to act in this capacity. e 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 registered this document is being filed merely to reflect a change in the registered office address, I m that the corporation has been notified in writing of this change.	
fatus	ignatury of Registered Agent Date	
, If signing on b	chalf of an entity:	
Peyton	1Bdin, PL	
,	Typed or Printed Name  * * * FILING FEE: \$35.00 * * *	
	" " FLLING FEE: 955.00 "	

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