

N34232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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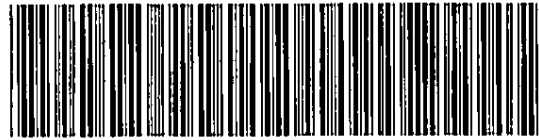
(Business Entity Name)

(Document Number)

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8/17/21

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Sheridan Ocean Club Master Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N34232

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:

Liz Levenson, Community Director

Name of Contact Person

Sheridan Ocean Club Master Association, Inc.

Firm/Company

1155 SE 7th Avenue

Address

Dania Beach, FL 33004

City/State and Zip Code

sheridanoceanclubed@highmarkres.com

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

For further information concerning this matter, please call:

Melissa Garcia

Name of Contact Person

at (786)

369-8879

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Sheridan Ocean Club Master Association, Inc.
2. The principal office address: 1155 SE 7th Avenue, Dania Beach, FL 33004
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/18/1989 Document number: N34232
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Katzman Chandler

1500 W Cypress Creek Road, Suite 408

Fort Lauderdale, FL 33309

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Gursky Ragan, PA

141 NE 3rd Avenue, Fifth Floor

P.O. Box NOT acceptable

Miami, FL 33132

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
Signature of an officer or director

CHAD HAAS, VP  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

[Signature]  
Signature of Registered Agent

7/27/21

Date

If signing on behalf of an entity:

Darrin Gursky  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)