

N41432

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Blue Cypress Golf + RV Resort Condo Assoc In
Name of Corporation

DOCUMENT NUMBER: N 41432

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:

Debby Minton-Bailey
Name of Contact Person

Blue Cypress Golf + RV
Firm/Company

13801 Hwy 441 SE Lot # 288
Address

OKeechobee, FL 34974
City/State and Zip Code

bcgolfandrvc@earthlink.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Nadine LEAP at (513) 284-0215
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

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BLUE CYPRESS GOLF + RU CONDO ASSOC INC
2. The principal office address: 13801 HWY 441 SE LOT # 288
OKEECHOBEE, FL 34974
3. The mailing address (if different): SAME AS ABOVE

4. Date of incorporation/qualification: _____ Document number: N41432
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)

JAY STEVEN LEVINE, PA
3300 PGA BLVD #530
BOCA RATON FL 33431

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

LEVINE LAW GROUP
2500 N MILITARY TRAIL SUITE 280
BOCA RATON, FLORIDA 33431
P.O. Box NOT acceptable

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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.

Nadine Lopez
Signature of an officer or director

NADINE LEVINE TREASURER
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.

Jay Levine
Signature of Registered Agent

6-20-19
Date

If signing on behalf of an entity:

Jay Steven Levine
Typed or Printed Name

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