n51049

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SECRETARY OF STATE
OFFICE OF CORPORATION

T. LEMIEUX

5297 West Copans Road Margate, Florida 33063 T | 954.486.7774 F | 954.486.7782

Attorneys at Law



DONNA DIMAGGIO BERGER, ESQ. dberger@KGBlawfirm.com

February 19, 2014

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

> Re: Ocean Pointe III Condominium Association, Inc. Change of Registered Agent

Dear Sir / Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations which has been properly completed by this office. Furthermore, enclosed please find a check made payable to the Florida Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed above.

Sincerely,

KATZMAN GARFINKEL & BERGER

Donna DiMaggio Berger, Esquire Founding Partner

DDB:dts Enclosures

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

statement of cha	nge is submitted for a co	rporation organized	507.1508, or 617.1508, Flori d under the laws of the State d agent, or both, in the State	of FLORIDA	
1. The name of t	he corporation: OCEA	N POINTE II		ASSOCIATION, INC	
3. The mailing a	ddress (if different): 10	7 HAMPTON R	OAD, SUITE 100, CLE	ARWATER, FL 33759	
4. Date of incorp	poration/qualification:	09/24/1992	Document number:	N51049	
	I street address of the cur tment of State: (If resign		nt and registered office on file	e with the	
	PROVIDENT MANAGEMENT CORP				
107 HAMPTON ROAD, SUITE 100					
	CLEARWATER, F	L 33759		IL FEB 24	
6. The name and (if changed):	l street address of the nev	w registered agent (if changed) and /or registered	24 AM 11: 4.7	
	KATZMAN GARFI	NKEL & BERGI	ER		
5297 WEST COPANS ROAD P.O. Box NOT acceptable					
The street address changed will	ess of its registered office be identical.	ce and the street ad	dress of the business office	of its registered agent,	
Such change was authorized by the	as authorized by resolut he board, or the corpora	ion duly adopted b tion has been notif	y its board of directors or b	y an officer so	
Zehl	re of an officer of director	7201	0 1 11	DRA III PRET.	
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as reg to comply with the prov id I am familiar with an ing filed merely to refle s been notified in writin	istered agent and a isions of all statute d accept the obliga ct a change in the t g of this change.	agree to act in this capacity es relative to the proper and ation of my position as regis registered office address, I l	l complete performance stered agent. Or, if this hereby confirm that the	
) 2//8	<u> </u>	
	ehalf of an entity:		Date		
3 0	•	P ESO			
	IMAGGIO BERGER Syped or Printed Name	<u>, ⊏3U.</u>			

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

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