N930000002056

(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: HUNTINGTON POINTE IV ASSOCIATION, INC.

Name of Corporation

Name of Corporation

DOCUMENT NUMBER: N93000002056

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

301 YAMATO ROAD, SUITE 2199

Address

BOCA RATON, FL 33431

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

,/561 \288-3999

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

CR2E045 (03/12)

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

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: HUNTINGTON POINTE IV ASSOCIATION, INC.			
2. The principal office address: C/O FIRST SERVICE RESIDENTIAL, 6251 N. ORIOLE BLVD., DELRAY BEACH, FL 33484			
3. The mailing address (if different): C/O FIRST SERVICE RESIDENTIAL, 6300 PARK OF COMMERCE BLVD., BOCA RATON, FL 33487			
4. Date of incorporation/qualification: 5/4/1993 Document number: N9300002056			
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)			
ROSENBAUM MOLLENGARDEN, PLLC 学名 节			
WEST PALM BEACH, FL 33401			
WEST PALM BEACH, FL 33401			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
WASSERSTEIN, P.A.			
301 YAMATO ROAD, SUITE 2199 P.O. Box NOT acceptable			
ROCA RATON FL 33431			
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.			
as changed will be identical. Such change was authorized by resolution duly adopted by its board of directors or by an officer so such change was authorized by resolution has been notified in writing of the change.			
Printed or typed name and title			
I hereby accept the appointment as registered agent and agree to act in this capacity. 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 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 performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with and accept the obligation of my position as registered performance of my duties, and I am familiar with a complete the obligation of my position and acc			
Signature of Registered Agent			
If signing on behalf of an entity:			
DANIEL WASSERSTEIN			
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 (03/12)