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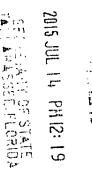
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: ANDros TSIE Property OWNERS ASSOCIATION, Inc.

DOCUMENT NUMBER: N9700000453

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:

Scott GITERMAN, PA

Scott C GHERMAN, PA

Firm/Company

902 Clint Moore RJ, Suite 108

Address

Boxa RATUN, FL 33 487

City/State and Zip Code

Saherman & Scott Gherman PA. (um

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

For further information concerning this matter, please call:

Scott GHERMAN at (56) 251-6625

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 Loni of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: And COS ISIE Property OWNERS ASSOCIATION, IN
2. The principal office address: 2400 Victor A Pt WEST POIM WEACH
FL 30411
3. The mailing address (if different): 7400 CENTIEPUTS W DT, Suite 175
WEST Palm BEach, FL 20409
4. Date of incorporation/qualification: 1/28/97 Document number: N9700000453
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)
Scott C GHERMAN, PA
151 NWT ST AVE
Dulpay Beach, FL 33444
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Scott C CHERMAN, PA
3017 (C19FV11010) (11V
902 Clinta Moole RD, Suite 108
P.O. Box NOT acceptable
BOCA RATEN, FL 33487
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.
Les PAC
Spenature of an other or director Church J. BRIGGS, Mendeut Audio Sele Poper 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.
6/30/2015
Signature of Registered Agent Date
If signing on behalf of an entity:
Scott C GHERTAN 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)