N9700003032

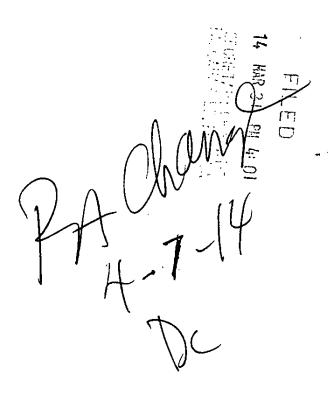
(Req	uestor's Name)	
(Add	ress)	
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(City.	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	

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COVER LETTER

TO: Amendment Section **Division of Corporations**

L'Hermitage II Condominium Association, Inc.

Name of Corporation

N97000003032

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:

Alyse Correa

Name of Contact Person

L'Hermitage II Condominium Association, Inc.

Firm/Company

3200 N. Ocean Boulevard

Fort Lauderdale, FL 33308

City/State and Zip Code

astmgr@lhermitage2.net

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

For further information concerning this matter, please call:

Alvse50

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

-	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida
in orde	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: L'Hermitage II Condominium Association, Inc.
2. The principal	office address: 3200 N. Ocean Boulevard
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 5/27/97 Document number: N9700003032
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Paul Moore
	3200 N. Ocean Boulevard
•	Fort Lauderdale
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Alyse Correa E T
	3200 N. Ocean Boulevard
	P.O. Box NOT acceptable Fort Lauderdale, FL 33308
	, 177 0
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
Signatur	Stuart M. Stein President The of an officer or director Stuart M. Stein President Printed or typed name and title
I hereby accept I further agree I performance of agent. Or, if the	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
alyse	A. Cossea 3/27/14
If signing on be	half of an entity:
Ту	yped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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