# N98000004179

(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phone	; #)
PICK-UP		MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	<u></u>	
	Office Use Onl	ly



11/22/22--01017--010 \*\*35.00



FEB 1 7 5. PRATHER

DocuSign Envelope ID. CF119132-1026-4E7A-BF0B-7AB2FE0308ED

# **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: 1500 OCEAN DRIVE CONDOMINIUM ASSOCIATION, INC. Name of Corporation

# DOCUMENT NUMBER: N98000004179

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:

Jonathan Goldstein, Esq.	
Name of Contact Person	
Haber Law	
Firm/Company	
251 NW 23 Street	
Address	
Miami, FL 33127	
City/State and Zip Code	
jgoldstein@haber.law	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Jonathan S. Goldstein	at ( <sup>305</sup>	379-2400
Name of Contact Person	Area Code &	& Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

#### DocuSign Envelope ID: CF119132-1026-4E7A-BF0B-7AB2FE0308ED

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

1. The name of the corporation: <u>1500 OCEAN DRIVE CONDOMINIUM ASSOCIATION, INC.</u>

2. The principal office address: 1500 OCEAN DRIVE, MANAGEMENT OFFICE, MIAMI BEACH, FL 33139

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)

 HALPERN, MARC AESQ.

 HALPERN RODRIGUEZ, L.L.P

 355 Alhambra Circle, Suite H01, Coral Gables, FL 33134

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

 (if changed):

 Haber Law

 251 NW 23 Street

 P.O. Box NOT acceptable

Miami, FL 33127

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.

Signature of an officer or director

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. Thereby confirm that the composations has been notified in writing of this change.

Jonathan Goldstein

10/28/2022

CF676D8E3F4C49C Signature of Registered Agent

Date

If signing on behalf of an entity:

Jonathan Goldstein

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 (04/13)