

N99 000004970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

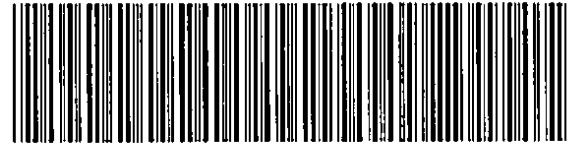
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HALPERN RODRIGUEZ, LLP

Attorneys and Counselors at Law

355 Alhambra Circle, Suite 1101
Coral Gables, Florida 33134
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Facsimile (305) 443-1880
E-Mail: hr@hrllplaw.com

April 4, 2023

VIA CERTIFIED MAIL

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Statement of Change of Registered Office or Registered Agent or Both for Corporations – Yacht Club at Portofino Condominium Association, Inc.

To whom it may concern:

Enclosed please find our Statement of Change of Registered Office or Registered Agent or Both for Corporations for Yacht Club at Portofino Condominium Association, Inc., and a check for \$35.00 made payable to the Department of State.

Very truly yours,

HALPERN RODRIGUEZ, LLP

MARC A. HALPERN, ESQ.
For the firm

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Yacht Club at Portofino Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N99000004970

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:

Marc A. Halpern

Name of Contact Person

Halpern Rodriguez, LLP

Firm/Company

355 Alhambra Circle Suite 1101

Address

Coral Gables, FL 33134

City/State and Zip Code

hr@hrlplaw.com

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

For further information concerning this matter, please call:

Janelle A. Arguelles

Name of Contact Person

at (305) 4428883

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Yacht Club at Portofino Condominium Association, Inc.

2 The principal office address: 90 ALTON RD MIAMI BEACH, FL 33139

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/20/1999 Document number: N99000004970

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)

Marc Halpern, Esq. / Halpern Rodriguez, LLP
800 South Douglas Road Suite 880 Coral Gables, FL 33134

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

Marc Halpern, Esq. / Halpern Rodriguez, LLP
355 Alhambra Cir, Suite 1101, Coral Gables, FL 33134

P.O. Box NOT acceptable

2023 APR 13 AM 8:25
FILED

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.

Roger Van Dyke
Signature of an Officer or Director

Roger Van Dyke, PRES YCPO
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.

[Signature]
Signature of Registered Agent

4/3/2023
Date

If signing on behalf of an entity:

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)