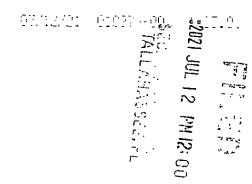
## N99 000005087

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## COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: LEE PARK CONDOMINIUM ASSOCIATION, INC.

**DOCUMENT NUMBER:** N99000005087

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

Name of Contact Person

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

		02, 607.1508, or 617.1508, Florida Statute nized under the laws of the State of FLORII	
		tered agent, or both, in the State of Florida	
1. The name of the corp	oration: LEE PARK COND	DOMINIUM ASSOCIATION, INC	C.
•		TREET, MIAMI, FL 33143	
<del></del>			
3. The mailing address (	(if different): N/A		
<del></del>	0/05/4000		
4. Date of incorporation	v/qualification: 8/25/1999	Document number: N99000005	5087 —————
5. The name and street a Florida Department of	address of the current registered a of State: (If resigned, enter resigne	agent and registered office on file with the ed)	
PRE	SIDIO REALTY, INC.		
7827 N. DALE MABRY HIGHWAY, #104			
TAM	PA, FL 33614		21 J
6. The name and street a (if changed):	address of the new registered age	ent (if changed) and /or registered office	2021 JUL 12 PM 12: 00
WAS	SSERSTEIN, P.A.		B
301	YAMATO ROAD, SUITE	2199	) i?
200	P.O. Box NOT	l'acceptable	Ü
BOC	A RATON, FL 33431		
The street address of its as changed will be iden	s registered office and the street tical.	address of the business office of its regist	ered agent,
Such change was autho authorized by the board	rized by resolution duly adopted i, or the corporation has been no	d by its board of directors or by an officer tified in writing of the change.	so
Tome J	the or director	FAYE VICTORS - MES	ident
I hereby accept the app I further agree to comp performance of my duti agent. Grif this docun hereby danfirm that he	pointment as registered agent and ly with the provisions of all state ies, and I am familiar with and a ment is being filed merely to reflute to a state in a state i	d agree to act in this capacity.  utes relative to the proper and complete accept the obligation of my position as reg	
	M	6/14/2021	
•	Registered Agent	Date	<del>_</del>
If signing on behalf of a	•		
DANIEL WASSE			
	* * * FILING FE	E: \$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)