P15000100354

(Requestor's Name)				
(Address)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
, ,				
(Document Number)				
Certified Copies Certificates of Status				
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> 2021 HAY -4 AH 2:59 SECRETARY OF STATE

6/7/21



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: April 30, 2021

Order#: 788580/010

Re: PEMBROKE COVE SOUTH MANAGER, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

 $XX_{\underline{}}$ File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Baronie c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation or	.0502, 607.1508, or 617.1508, Florida rganized under the laws of the State of rgistered agent, or both, in the State of	Florida
1. The name of t	he corporation: PEMBROKE COVE	SOUTH MANAGER, INC.	
2. The principal	office address: 801 Old York Road,	Jenkintown, PA 19046	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: December 21	, 2015 Document number: P1500	0100384
	street address of the current register tment of State: (If resigned, enter res	red agent and registered office on file vigned)	vith the
	NRAI Services, Inc.		
	1200 S Pine Island Road		
	Plantation	FL 33324	2021 F SECF TAI
Plantation FL 33324 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company			
	Corporation Service Company		
	1201 Hays Street		2:5 STAI
P.O. Box NOT acceptable			
	Tallahassee	FL 32301	_
The street addre	ss of its registered office and the str be identical.	reet address of the business office of	its registered agent,
Such change wa authorized by th	s authorized by resolution duly ado e board, or the corporative has been	opted by its board of directors or by a n notified in writing of the change.	n officer so
Mid	all & Kulle	Michael Scully	President
Signatur	e of an officer or director	Printed or typed name and	title
I further agree to of my duties, and document is being corporation has	the appointment as registered agen o comply with the provisions of all a d I am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this chain	it and agree to act in this capacity, statutes relative to the proper and co obligation of my position as register n the registered office address, I her nge.	mplete performance ed agent. Or, if this eby confirm that the
By: Aundrey	M. Daronce nature of Registered Agent	04/30/2021 Date	 -
Lindsey M. Baronie	e, Asst. Viče President	Date	
If signing on bel	half of an entity:		

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

Typed or Printed Name