712080

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(Requestor's Name)
(Address)
(Address)
(riddiess)
(City/State/Zip/Phone #)
. PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: Fifth Miraniar Condominium, Inc. (Name of Corporation)	
DOCU	MENT NUMBER: 712080	
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.	
	return all correspondence concerning this matter to the following:	
	Sonia Huie (Name of Contact Person)	
	(Firm/Company)	
	6750 Arbor Or # 104 (Address)	
	Miramar FL 33023 (City/State and Zip Code)	
For fur	ther information concerning this matter, please call:	
	Sonia Huie at (786) 487-7023 (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

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
1. The name of the corporation: Fifth Micamar Condominium, In
2. The principal office address: 6750 Arour Or # 104
Miramar FL 33023
3. The mailing address (if different): 6750 Arbor Or #104
MIRAMAR FL 33023
4. Date of incorporation/qualification: Document number: 712080
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Tanika Parker
6750 Arbor Or # 107
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Sonia Hule ===
6750 A(D) Dr #104 (P.O. Box NOT acceptable)
Miramar FL 33023
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) (Frinted 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.
Huie
(Signature of Registered Agent) (Date) If signing on behalf of an entity:
(Typed or Printed Name)

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* * * 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 (8/05)