*****35.00 P.O. Box 830698 Miami, FL 33283 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time ☐ Walk in Certificate of Status

NEW FILINGS Profit NonProfit Limited Liability Domestication Other

Mail out

| | AMENDMENTS |
|----|---------------------------------------|
| | Amendment |
| | Kesignation of R.A., Officer/Director |
| 1/ | Change of Registered Agent |
| | Dissolution/Withdrawal |
| | Merger |

☐ Will wait

Photocopy

| OTHER FILINGS |
|------------------|
| Annual Report |
| Fictitious Name |
| Name Reservation |

| REGISTRATION/ |
|---------------------|
| Foreign |
| Limited Partnership |
| Reinstatement |
| Trademark |
| Other |

JAN 1 4 1999;

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

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

| Pursuant to the | provisions of sections 607.0502, 617.0502, 607.15 | 08, or 617.1508, Florida Statutes, the |
|--|--|---|
| unaersignea coi | rporation organized under the laws of the State of $_$ | FLORIDA |
| Submits the Jour | owing statement in order to change its registered off | ice or registered agent, or both, in the |
| State of Florida | | 0 |
| 1. The name of | the corporation is: The Sovereigns | CONDOMINIUM |
| <i></i> | ISSOCIATION, INC. | |
| 2. The mailing a | ddress of the corporation is: $\frac{C/O}{L \times B} \frac{P/O}{P}$ | openty MANAgement, |
| LNC. | P.O. Box 830698 MIAM | 1, FL 33283 |
| 3. Date of incor | poration/qualification: 8/9/73 Doc | ment number: <u>127/58</u> |
| 4. The name and | address of the current registered agent and office: | |
| | HENRY ZAlkin | TALL SEC |
| _ | HENRY ZAIKIN 10691 N. Kendael Quie ; | #207 |
| _ | Mani FL 33/70 | |
| 5. The name and | address of the new registered agent and office: (P. O | Box Not Accentable) |
| | IliANA GILdelBeaL | 07 9 |
| _ | 6851 SW 147 AVENUE | · Clubhouse |
| | MIAMI FL 3319 | |
| The street addre | ss of its registered office and the street address of t | -C |
| Such change wa | sauthorized by resolution duly adopted by its boar | d of directors or by an officer so |
| X 17/1/1 | A A A | |
| (Signature | of an officer, chairman or vice chairman of the board) | 10-1-98 (Date) |
| | | (Date) |
| 111412 | (Printed or typed name and title) | (Date) |
| Having heen na | med as registered agent and to good remise. | |
| I fûrther agree to performance of t | ereby accept the appointment as registered agent of a comply with the provisions of all statutes relative my duties, and I am familiar with and accept the o | and agree to act in this capacity. I to the proper and complete hligation of my position as |
| registered agent. | Sting St-Dalland | 10.190 |
| (Si | gnature of Registered Agent) | (Date) . |
| If signing on behalf | of an entity: | |
| <u>(T</u> | yped or Printed Name) | (Capacity) |
| CR2E045(4/95) | • | (Capacity) FILING FEE: \$35.00 |
| | | ************************************** |