

728948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

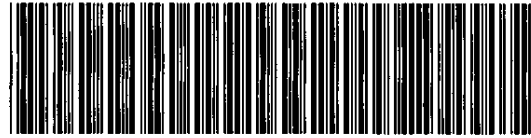
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800254794058

12/23/13--01018--012 **35.00

FILED
13 DEC 23 PM 2:14
SECRETARY OF STATE
HALLMARK CENTER, FLORENCE, SC

Ruler
1/3er

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Missionwood at Miramar Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 728948

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:

Tamar Duffner Shendell, Esq.
Name of Contact Person

Shendell & Associates, P.A.
Firm/Company

5340 N. Federal Highway, Suite 201
Address

Lighthouse Point, FL 33064
City/State and Zip Code

Tamar@shendell-law.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tamar Duffner Shendell at (954) 781-3747
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Missionwood at Miramar Condominium Association, Inc.
2. The principal office address: 8381 S. Missionwood Circle, Miramar, FL 33025

3. The mailing address (if different): c/o Cherry Bekaert LLC - Condo Dept
2525 Ponce De Leon Blvd - Suite 1040, Coral Gables, FL 33134

4. Date of incorporation/qualification: 02/26/1974 Document number: 728948

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)

Mirza Basulto & Robbins, LLP
9690 West Sample Road, Suite 103
Coral Springs, FL 33065

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

Shendell & Associates, P.A.
5340 N Federal Highway, Suite 201
P.O. Box NOT acceptable
Lighthouse Point, FL 33064

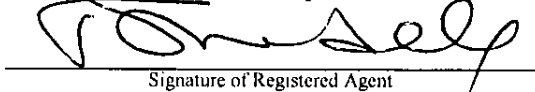
FILED
13 DEC 23 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

 - Joe Resident RESIDENT
Signature of an officer or director 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.

 12/3/13
Signature of Registered Agent Date

If signing on behalf of an entity:

Tamar Duffner Shendell
Typed or Printed Name

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