

741171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

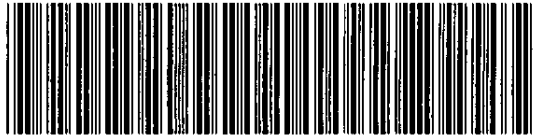
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FLANCO CONDOMINIUM ASSOCIATION, INC
(Name of Corporation)

DOCUMENT NUMBER: 741171

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:

HELIO DE LA TORRE, ESQ.
(Name of Contact Person)

SIEGFRIED, RIVERA, LERNER, DE LA TORRE & SOBEL, P.A.
(Firm/Company)

201 ALHAMBRA CIRCLE, SUITE 1102
(Address)

CORAL GABLES, FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

HELIO DE LA TORRE, ESQ. at (305) 442-3334
(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

CR2F045 (1/05)





201 ALHAMBRA CIRCLE | SUITE 603 | CORAL GABLES, FLORIDA 33134
MIAMI-DADE 305.442.0877 | FAX 305.416.8727 | TOLL FREE 800.737.1390

HOWARD J. PERL
HJPERL@SIEGFRIEDLAW.COM

REPLY TO HOWARD PERL

April 20, 2009

Gary Rosenkrantz
Flanco Condominium Association, Inc.
3701 North Country Club Drive
North Miami Beach, FL 33180

Re: Flanco Condominium Association, Inc. ("Association")

Dear Gary:

Per our discussion, enclosed please find the form required to change the Association's registered agent to the firm. The form must be executed by an Association officer where indicated, and mailed to the Florida Department of State at the address listed on the bottom of the form along with a check in the amount of Thirty-Five Dollars and 00/100 (\$35.00).

If you have any questions, please do not hesitate to contact me.

Respectfully yours,

SIEGFRIED, RIVERA, LERNER,
DE LA TORRE & SOBEL, P.A.



Howard J. Perl

HJP/ec
Enclosures
cc: President
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BROWARD | 8211 WEST BROWARD BOULEVARD | SUITE 250 | PLANTATION, FL 33324 | 954.781.1134
WEST PALM BEACH | NORTHBRIDGE CENTRE | 515 NORTH FLAGLER DRIVE | SUITE 701 | WEST PALM BEACH, FL 33401 | 561.296.5444

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 _____ In order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: FLANCO CONDOMINIUM ASSOCIATION, INC
2. The principal office address: 3701 North Country Club Drive, Aventura, FL 33180
3. The mailing address (if different): 3701 North Country Club Drive, Aventura, FL 33180
4. Date of incorporation/qualification: 12-15-1977 Document number: 741171

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)

Flanco Condominium Association, Inc.
3701 North Country Club Drive
Aventura, FL 33180

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

SKLRD, INC.
201 ALHAMBRA CIRCLE, SUITE 1102
CORAL GABLES, FLORIDA 33134

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]

Allen Rothman, President

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.

[Signature of Registered Agent]

4/16/09

If signing on behalf of an entity:

[Typical or Printed Name]

*** 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)

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TALLAHASSEE, FLORIDA

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