747497

LAW OFFICES
BECKER & POLIAKOFF, P.A.

3111 Stirling Road
Ft. Lauderdale, Florida 33312-6525

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.					
	(Corporation Name)	(До	cument #)	<u>- , , . , . , . , . , . , . , . , . </u>	
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NEW FILINGS	AMEN
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NonProfit	Resignati
Limited Liability	Change o
Domestication	Dissoluti
Other	Merger

AMENDMENTS	
Amendment	
 Resignation of R.A., Officer/Director	
Change of Registered Agent	
Dissolution/Withdrawal	
Merger	

	OTHER FILINGS
7848	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/-QUALIFICATION
Foreign
Limited Partnership
Reinstatement
 Trademark
Other

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

'Florida Department of State, Jim Smith, 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, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a.	The name of the corporation is: Concord Village Condominium II Association, Inc.
1b.	Date of incorporation June 4, 1979 Document number 747497
2. —	The name and address of the current registered agent and office: Willie Magin, 6401 N. University Drive, Suite 122, Tamarac, Florida 33321 US
3. 7	The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Gary A. Poliakoff, J.D., Becker & Poliakoff, P.A., 3111 Stirling Road, Fort Lauderdale, FL 33312
of i	e street address of its registered agent and the street address of the business office ts registered agent as changed will be identical.
an	officer so authorized by the board. Willie Magin, President SIGNATURE DATE DATE Typed or printed name and title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

SIGNATURE

(Registered Agent)

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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)

FILING FEE: \$35.00