762703

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COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJ	Halstoad Condominum Name of Corporation		
DOC	UMENT NUMBER: 742703		
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please	e return all correspondence concerning this matter to the following:		
	Scoth A Stoloff Name of Contact Person		
Dicker, Krivok + Stoloff PA			
	1818 S. Australian Ave #400		
	W. Palm Beach FL 33409 City/State and Zip Code		
	E-mail address: (to be used for future annual report notification)		
For fu	orther information concerning this matter, please call:		
	Scott A Sto loff Name of Contact Person at (561) 615 0123 Area Code & Daytime Telephone Number		
Enclo	sed is a \$35.00 check made payable to the Department of State.		
æ	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations Division of Corporations Clifton Building		

Tallahassee, FL 32314

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			
in order to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of the corporation: Halstood Condominium Hissociation			
2. The principal office address: 7830 MUI 3310 Ave Apt 201			
3. The mailing address (if different): Cl-N · NA · Co.			
SATTE			
4. Date of incorporation/qualification: Document number:			
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)			
Hatzman Garfinkel PA			
1501 NW 49 St 2005			
F+ Laudendale FL 33300 5			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
Dickor, KTINOK + Stolutter P. A.			
1818 3 Avertalian Ave Ste 480			
W Fom Beach FL 33409			
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 office of director Dominick Marguel 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 Lam 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 indifficient in writing of this change. 7-2 - 5			
Sgnaphre of Registered Agent Date			
If signing on behalf of an entity:			
)Gtt Stol oft			

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