MIAMI HEALTHCARE, INC. 313-317 MINORCA CORAL GABLES, FLORIDA 33134 Office Use Only

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	Office Use Only
1. CORPORATION NAME(S) & DOCUMENT OF THE PROPERTY OF THE PROPE	727
(Corporation Name) 2(Corporation Name)	(Document #) 2000030934386 -01/10/0001101011 ******35.00 ******35.00
3. (Corporation Name)	(Document #)
4. (Corporation Name) Walk in Pick up time	(Document #) Certified Copy
☐ Mail out ☐ Will wait	☐ Photocopy ☐ Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other

Examiner's Initials 2 - 19

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

Pursuant to the provisions of section 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.

The name of the corporation is	NORTH BAY COMMUNITY ASSOCIATION, INC.	
2. The mailing address of the corporation is :	c/o Attwood-Phillips 1350 Orange Ave Ste 100 Winter Park FL 32789	
3. Date of incorporation/qualification: 04/25/1984	Document number: N02727 og S	
4. The name and address of the current registered agent and office:		
James W. Hart, Jr. 2180 W SR 434 Ste 5000 Longwood FL 32779 5. The name and address of the new registered a	gent and office (PO Box NOT Acceptable):	
Roger V. Phillips Attwood-Phillips Inc. 1350 Orange Ave Ste 100 Winter Park FL 32789		
The street address of its registered office and the agent, as changed, will be identical.	e street address of the business office of its registered	
Such change was authorized by resolution duly authorized by the Board.	adopted by its Board of Directors or by an officer so	
X Doug Due Or (Signature of an officer, chairman, vice chairman of the	ne Board) (Date)	
Doug Salvador PRESIDENT (Print or type name and title)	•	
hereby accept the appointment as registered age	ept service of process for the above-stated corporation, I nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, and osition as registered agent.	
Al pellem	12/2/199	
(Signature of Registered Agent)	(Date)	
If signing on behalf of an entity:		
Roger V. Phillips	President	
(Print or Type name)	(Capacity)	
* * * * FILING FEE: \$35.00 * * * *		

DIVISION OF CORPORATIONS

PO BOX 6327

TALLAHASSEE, FL 32314