## N03000000958

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE
TALLAHASSEE, FILORIDA

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## COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: L'Ar	mbiance Beach Condom Name of C		
DOCUMENT NUM	BER: NO3	000000958	
The enclosed Stateme	nt of Change of Registered Office	e/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:			
	Lisa Name of Cor	Magill	
	Name of Co	ntact Person	
	D 1 0	Deffelor	
Becker & Poliakoff Firm/Company			
3111 Stirling Road			
Address			
Fort Lauderdale, FL 33312 City/State and Zip Code			
lmagill@becker-poliakoff.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
	Lisa Magill	at ( 954 ) 987-7550 Area Code & Daytime Telephone Number	
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.
1. The name of the corporation: L'Ambiance Beach Condominium Assn., Inc.
2. The principal office address: 4240 Galt Ocean Drive  Ft. Lauderdale, FL 33308
3. The mailing address (if different):
4. Date of incorporation/qualification: 2-4-03 Document number: NO300000 9.58
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)
Rosenberg Arthur esq
64 Lauderdale FL 33369
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed): Becker + Polickoff
3111 Stirling Rd. P. Box NOT acceptable
Ft. Landerdale, FL 33312
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.    ATRICK O'BRIEN PRESIDENT   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.
Signature of Registered Agent  Date  Column
If signing on behalf of an entity:  LISA MAGILL  Typed or Printed Name

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