## ND4000001827

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SCORETARY OF STAFE CONTINUES OF CORPORATIONS

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## COVER LETTER 🔍

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TO: A	umendment Section bivision of Corporations	
	T: Las Brisas at Country Club of Miami Condo	minium Association INC.
SUBJECT	Name of Corporation	
	N0400001827	
	ENT NUMBER: N0400001827	
The enclos	sed Statement of Change of Registered Office/Agent and fee are submitted for fi	ling.
Please retu	arn all correspondence concerning this matter to the following:	
	Elena Otero, Esq.	
	Name of Contact Person	,
	Ritter, Zaretsky & Lieber, LLP	`
	Firm/Company	
	2915 Biscayne Blvd., Suite 300	
	Address	
	Miami, Florida 33137	
	City/State and Zip Code	
	elena@rzilaw.com	
	E-mail address: (to be used for future annual report notification)	
For further i	information concerning this matter, please call:	
	Elena Otero   at ( 305 ) 372-0   Name of Contact Person   Area Code & Daytime Telepho	one Number
Enclosed is	a \$35.00 check made payable to the Department of State.	
	Mailing Address: Street Address:	·
	Amendment Section Amendment Section Division of Corporations Division of Corporations	j
	P.O. Box 6327 Clifton Building	
	Tallahassee, FL 32314 2661 Executive Center C	ircle
	Tallahassee, FL 32301	

CR2E045 (8/05)

· JUL 19 2011



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 12, 2011

ELENA OTERO, ESQ. RITTER, ZARETSKY & LIEBER, LLP 2915 BISCAUNE BLVD., SUITE 300 MIAMI, FL 33137

SUBJECT: LAS BRISAS AT COUNTRY CLUB OF MIAMI CONDOMINIUM

ASSOCIATION, INC.

Ref. Number: N04000001827

We have received your document for LAS BRISAS AT COUNTRY CLUB OF MIAM! CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 611A00018996

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

1. The name of the corporation: Las Brisas at Country Club of Miami Conduminium  2. The principal office address: 8181 NW 154 Street, Suite 270, Miami Lakes, FL 33016		Association,	INC
3. The mailing address (if different):			
4. Date of incorporation/qualification: 2/19/2004 Document number:	N04000001827		
<ol><li>The name and street address of the current registered agent and registered office on fil Florida Department of State: (If resigned, enter resigned)</li></ol>	e with the		
Eisenger, Brown, Lewis & Frankel, PA			
4000 Hollywood Blvd., Suite 265-S			
Hollywood, FL 33021		9	
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):	office	FILEU SIAILUSION OF CORPORATION	
Ritter, Zaretsky & Lieber, LLP	<del></del>	F CONTE	
2915 Biscayne Blvd., Suite 300 P.O. Box NOT acceptable		<b>P</b> 455	
Miami, Florida 33137		2:4	
The street address of its registered office and the street address of the business office of as changed will be identical.		<b>9</b>	
Such change was authorized by resolution duly adopted by its board of directors or by authorized by the board, or the corporation has been notified in writing of the change.			
Signature of surdifficer or dispetor Printed or typed name an			
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 c of my duties, and I am familiar with and accept the obligation of my position as registe document is being filed merely to reflect a change in the registered office address, I hele corporation has been natified in writing of this change.	omplete performance red agent. Or, if this reby confirm that the		
$\mathcal{L}$	11		
Signature of Registered Agent Date			
If signing on behalf of an entity:			
Elena Otero Typed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (\$405)

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