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R. WHITE

COVER LETTER

TO:	Amendment Section	
	Division of Corporations	

Las Brisas at Country Club of Miami Condominium Association, Inc

SUBJECT:

Name of Corporation

DOCUMENT NUMBER: NO400001827

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Walter Anon

Name of Contact Person

Law Offices of Walter A. Anon, P.A.

Firm/Company

7975 NW 155 Street, Suite A

Address

Miami Lakes, Florida 33016

City/State and Zip Code

Walteranon@anonlawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Walter Anon

,,305 \821-5419

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 statement of change is submitted for a corporation organized under the laws in order to change its registered office or registered agent, or both,	of the State of Florida
 The name of the corporation: Las Brisas at Country Club of Miami The principal office address: 7055 NW 186 Street, Hialeah, F 	Condominium Association, Inc Florida 33015
3. The mailing address (if different):	
4. Date of incorporation/qualification: 02/19/2004 Document no	nmber: N0400001827
5. The name and street address of the current registered agent and registered Florida Department of State: (If resigned, enter resigned)	office on file with the
Law Office of Brian W. Pariser, P.A.	
9155 South Dadeland Boulevard, Penthouse 1,	Suite 1718
Miami, Florida 33156	
6. The name and street address of the new registered agent (if changed) and (if changed): Law Office of Walter A. Anon, P.A.	/or registered office
7975 NW 155th Street, Suite A	
P.O. Box NOT acceptable Miami Lakes, Florida 33016	77
The street address of its registered office and the street address of the business changed will be identical.	
Such change was authorized by resolution duly adopted by its board of dir authorized by the board, or the corporation has been notified in writing of	the change.
	mo, President
I hereby accept the appointment as registered agent and agree to act in the I further agree to comply with the provisions of all statutes relative to the performance of my duties, and I am familiar with and accept the obligation agent. Or, if this document is being filed merely to reflect a change in the hereby confirm that the corporation has been notified in writing of this change.	or typed name and title nis capacity, proper and complete on of my position as registered exercistered office address, I cange.
7/	5/16
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Typed or Printed Name	

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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