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LAW OFFICES

## ROBERT KAYE & ASSOCIATES, P.A.

Leer'd 09/08/08

6261 NORTHWEST 6TH WAY SUITE 103 FORT LAUDERDALE, FLORIDA 33309

WWW.RKAYELAW.COM

ROBERT L. KAYE
DEBORAH S. SUGARMAN
MICHAEL S. BENDER
ANDREW B. BLACK
BRITTANY J. RUBBO
LOURDES M. SANCHEZ-BARCIA
ADAM G. LEVINE

TELEPHONE (954) 928-0680 1-800-974-0680 TELEFAX (954) 772-0319

September 5, 2008

Latitude on the River Condominium Association, Inc. c/o Susan Delano 185 SW 7<sup>th</sup> Street, Unit 1202 Miami, Florida 33130

Re: Change of Registered Agent

Dear Members of the Board:

Pursuant to your request, I have enclosed herewith the Statement of Change of Registered Office or Registered Agent or Both for Corporations changing the registered agent to Robert Kaye & Associates, P.A. Please execute the enclosed form as indicated and mail it, along, with your check in the amount of \$35.00 payable to the Florida Department of State to:

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

If you should have any questions, please do not hesitate to contact us.

ICHAEL S. BENDER

MSB/om Enclosure

cc: Robert L. Kaye, Esq.

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Latitude on the Liver Condominion Associate (Name of Corporation)
DOCUMENT NUMBER: NO400007158
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:
Michael S. Bender, ESq (Name of Contact Person)
Pohet Kaye a Associates, P.a. (Firm/Company)
6261 Northwest 6 Way, Suite 103 (Address)
Fort landerdale, florida 33309 (City/State and Zip Code)
For further information concerning this matter, please call:
Michael S. Bender, 859. at (954) 928-0680 (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  Street Address: Amendment Section  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 Florida.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Latitude on the River Condominion Association
2. The principal office address: 185 S.W. 7th Street
Miami, Aorida 33130
3. The mailing address (if different): 80 5.w. 8th Street, Suite 2710
Niami, Florida 33130
4. Date of incorporation/qualification: 7/21/2004 Document number: NO 40000 07153
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
David H. Rogel, Esq.
Becker + Poliakoff, p.a.
Jai Alhambra Plaza, 10th Ploor
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Robert Kaye a Associates, P.a.
6261 North west 6th way Suite 103 (P.O. Box NOT acceptable)
Fort Landerdale, Florida 33309
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.
(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)  (Signature of Registered Agent)  (Date)
If signing on behalf of an entity.
Tobert Kaye (Typed or Printed Name)

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