N04000009596

(Requ	estor's Name)	
(Addre	ss)	
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(City/S	tate/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nam	e)
(Docu	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	
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03/24/14--01030--007 **35.00



3/25/14

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Skyline on Brickell Condominium Association, Inc.

Name of Corporation

DOCUMENT NUMBER: 900268466

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:

Steven Katz

Name of Contact Person

Kubicki Draper

Firm/Company

One East Broward Blvd., Suite 1600

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

sbk@kubickidraper.com

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

For further information concerning this matter, please call:

Steven Katz

.,954

713-2405

Name of Contact Person

Area Code & Davtime 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

CR2E045 (03/12)

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

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: Skyline on Brickell Condominium Association, Inc.
2. The principal office address: 2101 Brickell Avenue, Suite 105. Miami, FL 33129
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/08/04 Document number: N0400009596
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)
Katzman, Garfinkel & Berger
5297 West Copans Road
Margate, FL 33129
5297 West Copans Road Margate, FL 33129 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Steven Katz, Kubicki Draper One East Broward Blvd., Suite 1600
Steven Katz, Kubicki Draper
One East Broward Blvd., Suite 1600
P.O. Box NOT acceptable Fort Lauderdale, FL 33301
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.
ARIEL RODRIGUEZ V.P. PTREASURE
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.
7/20/14
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
CR2E045 (03/12)