## 1050003596

(Re	equestor's Name)	· ·
. (Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 8, 2009

CITYSIDE CONDOMINIUM ASSOCIATION, INC. C/O THE CONTINENTAL GROUP INC. 2950 N 28 TERRACE HOLLYWOOD, FL 33020

SUBJECT: CITYSIDE CONDOMINIUM ASSOCIATION, INC. Ref. Number: N05000003596

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

Please return your check with a note stating what the money is intended for.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Harting Con

Letter Number: 009A0000560

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## JAN 20 PH I

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of FLORIDA to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	the corporation: CITYSIDE CONDOMINIUM UNIT 3 BLDG 4C	
2. The principal of	office address: 1771 CITYSIDE DRIVE, WEST PALM BEACH, FL 33401	
3. The mailing ac	ddress (if different):	_
4. Date of incorp	oration/qualification: 04/07/2005 Document number: No5000003596	
	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	SKRLD, INC:	
	201 ALHAMBRA CIRCLE STE 1102	
ĺ	CORAL GABLES FL 33134 US	
<ol><li>The name and (if changed):</li></ol>	street address of the new registered agent (if changed) and /or registered office	
,	CITYSIDE CONDOMINIUM ASSOCIATION, INC.	
	1771 CITYSIDE DRIVE, WEST PALM BEACH, FL 33401 (P.O. Box NOT acceptable)	
	ss of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.	
(Signatur	TUAN PARRA PRESIDENT (Printed or typed name and title)	
I hereby accept t I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity.  o comply with the provisions of all statutes relative to the proper and complete performance  d I am familiar with and accept the obligation of my position as registered agent. Or, if this  ng filed merely to reflect a change in the registered office address, I hereby confirm that the  peen notified to writing of this change.	
	nature of Registered Agent)  // (Date)	
,		
If signing on beh	ian of an energy:	
(T)	ped or Printed Name)	
•	* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)