

No 000000008

(Requestor's Name)

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(City/State/Zip/Phone #)

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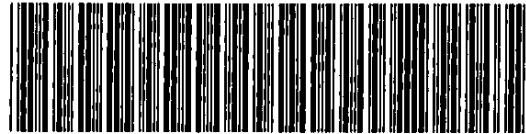
(Business Entity Name)

(Document Number)

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8/15/07

DICKER, KRIVOK & STOLOFF, P.A.

ATTORNEYS AT LAW

1818 AUSTRALIAN AVENUE SOUTH
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WEST PALM BEACH, FLORIDA 33409

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JOHN R. SHEPPARD, JR.

August 6, 2007

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(561) 615-0123

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(561) 615-0128

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

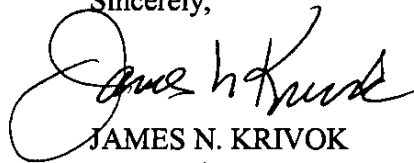
**Re: Change of Registered Agent
Greenway Professional Center Condominium Association, Inc.**

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Agent along with this firm's check #9584 in the amount of \$35.00 to cover your filing fee in connection with the above-captioned matter. Please file same and return a conformed copy in the self-addressed stamped envelope enclosed for your convenience.

Should you have any questions, please contact me.

Sincerely,


JAMES N. KRIVOK
For the Firm

JNK/lam
Cc: Client

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Greenway Professional Center Condominium Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N05000002270

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:

James N. Krivok, Esquire

(Name of Contact Person)

Dicker, Krivok & Stoloff, P.A.

(Firm/Company)

1818 Australian Avenue South

(Address)

West Palm Beach, Florida 33409

(City/State and Zip Code)

For further information concerning this matter, please call:

James N. Krivok, Esquire

(Name of Contact Person)

at (561) 615-0123

(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 617.1508, 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: The Commons at Abacoa, a Condominium Association, Inc.
2. The principal office address: c/o Paramount Real Estate, 3801 PGA Boulevard, Suite 606, Palm Beach Gardens, Florida 33410
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/05/06 Document number: N060000000 88
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

REGSERV CORP.

3801 PGA Boulevard, Suite 600

Palm Beach Gardens, Florida 33410

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

James N. Krivok, Esquire

1818 Australian Avenue South

(P.O. Box NOT acceptable)

West Palm Beach, Florida 33409

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 of the corporation~~ has been notified in writing of the change.


(Signature of an officer or director)

Adam Linkhart, PRES.
(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)

7/16/2007
(Date)

If signing on behalf of an entity:

(Typed 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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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