## N0600000 8526

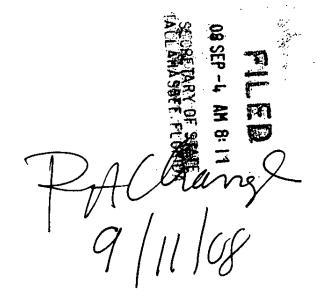
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(/\d	arcasj	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nam	e)
<u> </u>		
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



800135324058

09/04/08--01008--024 \*\*35.00





## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: Sun	set Lakes Villas Condominiun (Name of Co	n Association, Inc.		
DOCUMENT NU	MBER: N06000008526			
The enclosed State	ement of Change of Registered Office	/Agent and fee are submitted for filing.		
Please return all co	orrespondence concerning this matter	to the following:		
	Robert A. Stok, Esquire			
(Name of Contact Person)				
	Stok & Associates, PA (Firm/Co	mpany)		
3	2875 NE 191 Street, #304 (Addr	ess)		
<u> </u>	Aventura, Florida 33180			
	(City/State and	•		
For further inform	ation concerning this matter, please ca	all:		
Ray Shapiro (Na	ame of Contact Person)	at (305) 935-4440 (Area Code & Daytime Telephone Number).		
Enclosed is a \$35.0	00 check made payable to the Departr	ment 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508 inge is submitted for a corporation organized under or to change its registered office or registered agent,	the laws of the State of Florida	is
1. The name of t	the corporation: Sunset Lake Villas Condominium	Association, Inc.	
2. The principal	office address: 945 South Federal Highway, Dania	Beach, FL 33004	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 08-14-2006 Docu	ment number: N06000008526	
	I street address of the current registered agent and retement of State:	gistered office on file with the	
	Leonid Nerdinsky, Esquire		
	2875 NE 191 Street, #304		
	Aventura, Florida 33180	TACE OF	8.
6. The name and (if changed):	street address of the new registered agent (if change	ed) and /or registered office	SEP -4
	Robert A. Stok, Esquire		
	2875 NE 191 Street, #304		
	(P.O. Box NOT acceptable) Aventura, Florida 33180		. <del>-</del>
The street addre	ess of its registered office and the street address of be identical.	the business office of its registere	d agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its boate or the corporation has been notified in w	ard of directors or by an officer so riting of the change.  Kates Director	
I hereby accept I further agree offmy duties, an abcument is bein dorporation has (Sig	the appointment as registered agent and agree to be comply with the provisions of all statutes relative of I am familiar with and accept the obligation of the filed merely to reflect a change in the registered been notified in writing of this change.  The province of Registered Agent (Special Control of the Province Agent)  The province of Registered Agent (Special Control of the Province Agent)  The province of Registered Agent (Special Control of the Province Agent)	(Printed or typed name and title)  act in this capacity	ormance Dr. if this that the
Robert A. Stol	k, Esquire		

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