

NO7000000856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

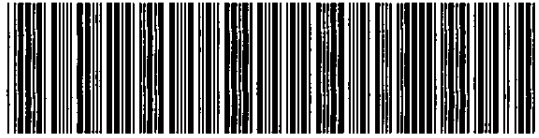
(Business Entity Name)

(Document Number)

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12/07/09--01021--008 **35.00

APPROVED
AND
FILED
09 DEC - 7 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6/11/10
12/11/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Oaks I at Biscayne Landing Condominium Associ
Name of Corporation

DOCUMENT NUMBER: N07000000856

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:

Coralee G. Penabad, as authorized agent

Name of Contact Person

Coralee G. Penabad, PA

Firm/Company

235 Altara Avenue

Address

Coral Gables, Florida 33146

City/State and Zip Code

bbaquet@h-plegal.com

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

For further information concerning this matter, please call:

Coralee G. Penabad

Name of Contact Person

at (305) 567-2869
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 Oaks I at Biscayne Landing Condominium Association
2. The principal office address: 15051 Royal Oaks Lane, #103, N. Miami, Florida 33181

3. The mailing address (if different): same

4. Date of incorporation/qualification: 01/24/2007 Document number: N07000000856

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)

CFRA, LLC

4221 W. Boy Scout Boulevard, Suite 1000

Tampa, Florida 33607

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

Coralee G. Penabad, as authorized agent

235 Altara Avenue

P.O. Box NOT acceptable

Coral Gables, Florida 33146

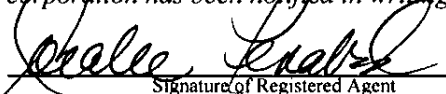
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

Signature of an officer or director

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

12/2/09
Date

If signing on behalf of an entity:

Coralee G. Penabad
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)

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