1439047

| (Re | equestor's Name) | |
|-------------------------|--------------------|---------------------------------------|
| (Ad | ldress) | |
| (Ac | ddress) | |
| (Cir | ty/State/Zip/Phone | · · · · · · · · · · · · · · · · · · · |
| PICK-UP | ☐ WAIT | MAIL |
| (Bı | usiness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only

Your



600123679616

04/17/08--01015--004 **35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

2008 APR 21 AM 10: 26

COVER LETTER

Division of Corporations SUBJECT: FAIRWAY CLUB HOMEOWNERS ASSOCIATION, INC. DOCUMENT NUMBER: N29047 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: Andres Berrio, Esq. FUENTES & BERRIO, LLP 12546 WEST ATLANTIC BULLEVARD CORAL SPRINGS, FLORIDA 33871
(City/State and Zip Code) For further information concerning this matter, please call: Andres Berrio, Esq. at (954) 752-1110

(Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

TO:

Amendment Section

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 FLOQUOA in order to change its registered office or registered agent, or both, in the State of Florida. |
|---|
| 1. The name of the corporation: FAIRWAY CLUB HOMEOWNERS ASSOCIATION, IN |
| 2. The principal office address: 10034 WEST MCNAB |
| TAMARAC, FL 33321 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 10/28/1988 Document number: N29047 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| BERRIO, ANDRES |
| 101 N. PINE ISLAND 127, SUITE 201 |
| PLANTATION, FL 33324 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| ANDRES BERRIO, ESO, FUENTES & BERRIO, LLPES & |
| 12546 LEST ATLANTIC BULLEVARD (P.O. Box NOT acceptable) |
| CURAL SPRINGS, FLORIDA 33071 |
| 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) (Date) |
| (Signature of Registered Agent) (Date) |
| 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
45 (8/05)

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