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SECRETARY OF STATE VLLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: 1000 Island Boulevard Condominium Association, Inc. (Name of Corporation)			
DOCUMENT NUMBER: N40414			
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:			
Lisa A. Lerner, Esquire (Name of Contact Person)			
Siegfried, Rivera, Lerner, De La Torre & Sobel, P.A. (Firm/Company)			
201 Alhambra Circle, Suite 1102 (Address)			
Coral Gables, FL 33134 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Lisa A. Lerner, Esquire (Name of Contact Person) at (305) 442-3334 (Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section Street Address: Amendment Section			

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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: 1000 Island Boulevard Condominium Association, Inc.	
2. The principal office address: 1000 Island Boulevard, Aventura, Florida 33180	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/19/90 Document number: N40414	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Philips, Eisinger & Brown, P.A.	
4000 Hollywood Boulevard South, Suite 265	7
Hollywood, Florida 33021	O7 D
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	CI -8
SKRLD, Inc.	PH 2
201 Alhambra Circle, Suite 1102	2: 38 STATE
(P.O. Box NOT acceptable) Coral Gables, FL 33134	
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	agent,
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.	
Madeline Zero (Signature of an Attice of Affector) MADELINE Zero (Printed or typed name and other)	
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 perfor of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or document is being filed merely to reflect a change in the registered office address, I hereby confirm the corporation has been notified in writing of this change.	mance if this nat the
(Signature of Registered Agent) 9/17/07, (Date)	
If signing on behalf of an entity:	
Lisa A. Lerner, Secretary (Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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