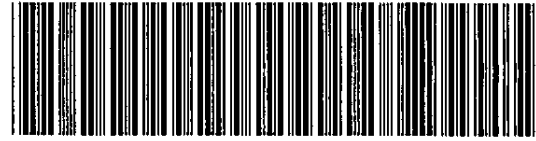


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

R. White
OCT 07 2016

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: POINT LAKE VILLAS CONDOMINIUM ASSOCIATION, INC.

Name of Corporation

N94000000034

DOCUMENT NUMBER: _____

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:

Grisel Morales, Esq.

Name of Contact Person

Muinos & Morales P.L.

Firm/Company

300 Sevilla Avenue Suite 301

Address

Coral Gables, FL 33134

City/State and Zip Code

gmorales@msquaredlaw.com

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

For further information concerning this matter, please call:

Grisel Morales, Esq.

305

403-0641

at (_____) _____

Name of Contact Person

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: POINT LAKE VILLAS CONDOMINIUM ASSOCIATION, INC.
2. The principal office address: C/O Muinos & Morales P.L., 300 Sevilla Avenue Suite 301 Coral Gables, Florida 33134
3. The mailing address (if different):

4. Date of incorporation/qualification: 01/05/1994 Document number: N94000000034

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)
Barbara Rosas
8785 SW 165 AVE SUITE 200
MIAMI, FL 33193

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Muinos & Morales P.L.
300 Sevilla Avenue Suite 301
Coral Gables, Florida 33134

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 OCT -3 PM 4:02
FILED

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.

X [Signature]
Signature of an officer or director

Heawa Gonzalez
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]
Signature of Registered Agent

7/28/16
Date

If signing on behalf of an entity:

Grisel Morales, Esq.
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