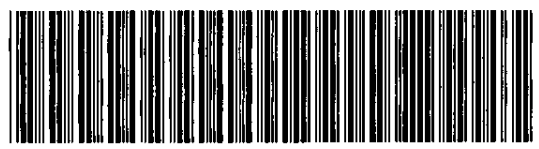


N/94000000943

(Requestor's Name)

(Address)



000215624180

LAW OFFICES SIEGFRIED, RIVERA, LERNER, DE LA TORRE & SOBEL, P.A.

201 ALHAMBRA CIRCLE | SUITE 1102 | CORAL GABLES, FLORIDA 33134

PICK-UP WAIT MAIL

12/30/11--01005--006 **35.00

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

R.A.

1-10-12

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.

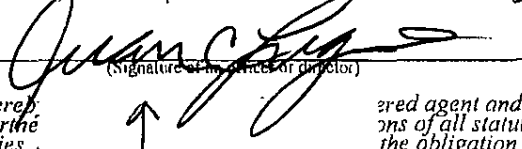
1. The name of the corporation: POINCIANA AT SUNSET LAKES HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 6955 N.W. 77TH AVENUE, SUITE 407
MIAMI, FL 33175
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/21/1994 Document number: N94000000943
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

RENOVATIONS PROPERTY MANAGEMENT
6955 N.W. 77TH AVENUE, SUITE 407
MIAMI, FL 33166


6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- SKRLD, INC.
201 ALHAMBRA CIRCLE, SUITE 1102
(P.O. Box or personal mailbox NOT acceptable)
CORAL GABLES, FL 33134

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TALLAHASSEE, FLORIDA

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 of an officer or director)

I hereby affirm that I am duly qualified to act as registered agent and agree to act in this capacity, in accordance with the provisions of all statutes relative to the proper and complete performance of my duties, and I hereby confirm that the corporation has its registered office address at _____



JUAN C. LUGO/President
(Printed or typed name and title)

12/28/11
(Date)

If signed by _____
LISA A. LERNER
(Typed or Printed Name)

_____ SECRETARY
(Capacity)