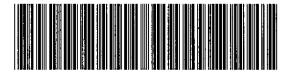
## N97000000235

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
'\ (Dusiness Enuty Name)
. (Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

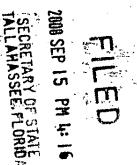
Office Use Only



900135537989

RA Chāuge

09/15/08--01013--024 \*\*35.00



-ADR 9/18/08

## **COVER LETTER**

Division of Corporations
SUBJECT: 10 in CIANA ROLATO VILLAG CONDO. 11 A 0000.
DOCUMENT NUMBER: N 97 010 0 0 1 235
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:
Name of Contact Person)
Mnite Property Management. (Firm(Company)) Management.
P.V. Box 1053 637 (Address)
Miami, FL 332 V 5-3 V 37 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305 127. 2446 (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

٠,

## 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 +\0 Y \ \d \CLUB \ \CLUB
1. The name of the corporation: Ninciana Royal Villas Cindominium ]
2. The principal office address: 15/1-15/3/L W. LU ave Fisheritor
1/\ullean, 4L 3301V.
3. The mailing address (if different): $\frac{V}{V}$ , $V$
4. Date of incorporation/qualification: 11 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:  Mayitza Betancourt (Betancourt,)  Mayitza Betancourt (Mena & acroc.)
19 W. Flagler St. #720 = = 7.
Miami, 72 33130
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Mrite Property Managers
(P.O. Box NOT acceptable)
Miami 71 33175
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.
Sallun Survey peech pres.
(Printed or typed name and title)  I hereby accept the appointment as registered agent and agree to act in this capacity
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)
If signing on behalf of an entity:
Venanica Abd A Ma (Typed or Printed Name)

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