

N960000001178

Fein & Meloni, Esqs.  
900 S.W. 40<sup>th</sup> Avenue  
Plantation, Florida 33317

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

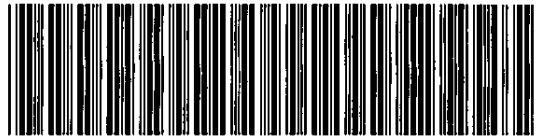
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07 OCT -8 PM 12:28

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FEIN & MELONI

No. 4026 P. 4

**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: Doral Landings Townhomes Association, Inc.
2. The principal office address: Guarantee Management, 6925 NW 42nd Street, Miami, FL. 33166
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/01/1996 Document number: N96000001178
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

SKRLD, Inc.

201 Alhambra Circle, Suite No. 1102

Coral Gables, FL. 33134

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Steven A. Fein, Esq.

900 South State Road 7

(P.O. Box NOT acceptable)

Plantation, Florida 33317

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)

RAUL ARELLANO - TREASURER  
(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)

8/30/07  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(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

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