

713811

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(City/State/Zip/Phone #)

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TALLAHASSEE FLORIDA

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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: PORTOFINO CONDOMINIUM APARTMENTS OF PALM BEACH, INC
2. The principal office address: 2600 NORTH FLAGLER DRIVE
WEST PALM BEACH, FL 33407
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 12/18/1967 Document number: 713811
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

JAMES N. KRIODK

DICKER KRIODK & STOLOFF PA

1818 AUSTRALIAN AVENUE, SOUTH, SUITE 400
WEST PALM BEACH, FL 33409

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

BROUGH, CHADROW & LEVINE, P.A.

1900 N COMMERCE PARKWAY

(P.O. Box NOT acceptable)

WESTON, FL 33326

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.

Raymond Mills-Johnson
(Signature of an officer or director)

RAYMOND MILLS-JOHNSON, PRESIDENT
(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.

12/2/09
(Signature of Registered Agent)

1/12/09
(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 32316

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