7/50//

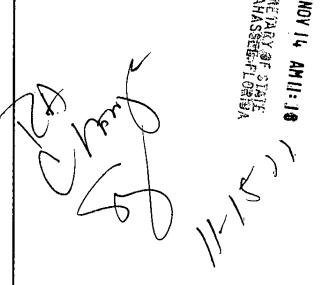
(Requestor's Name)	-		
(Address)	-		
(Address)	-		
(City/State/Zip/Phone #)	-		
PICK-UP WAIT MAIL			
(Business Entity Name)	-		
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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11/14/11--01061--009 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Leisureville Fairway Six Ass	ociation, Inc.			
DOCUMENT NUMBER: 71501	11			
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:			
Matthew Zifrony, Esq. Name of Contact Person				
Name of Contact Pe	rson			
Tripp Coott D A				
Tripp Scott, P.A. Firm/Company				
110 SE 6th Street,15th Floor				
Address				
Fort Laudordalo, Flori	do 22201			
Fort Lauderdale, Florida 33301 City/State and Zip Code				
kak@trinnscott.co	om.			
kak@trippscott.com E-mail address: (to be used for future annual report notification)				
·				
For further information concerning this matter, please call:				
Karen Bader	954 \ 627-3717			
Name of Contact Person	954) 627-3717 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	Street Address: Amendment Section Division of Corporations Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statinge is submitted for a corporation organized under the laws of the State of \overline{Flo} are to change its registered office or registered agent, or both, in the State of Flor	orida
1. The name of	the corporation: Leisureville Fairway Six Association, Inc.	
	OCEO Manh Call Davidavand	
Pompano	Beach, Florida 33064	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 7/25/68 Document number:	715011
	d street address of the current registered agent and registered office on file with tement of State: (If resigned, enter resigned)	he
	Becker & Poliakoff, P.A.	
	2255 Glades Road, Suite 300E	FIL MELAHASSI
	Boca Raton, Florida 33431	ASS.
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	
	Tripp Scott, P.A.	
	110 SE 6th Street, 15th Floor	-
	P.O. Box NOT acceptable	
•	Fort Lauderdale, Florida 33301	
The street address changed will	ess of its registered office and the street address of the business office of its rebe identical.	egistered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change.	ficer so
Made	Secretary GLA Printed or types name and title	DYS CASHIN
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete I am familiar with and accept the obligation of my position as registered a ng filed merely to reflect a change in the registered office address, I hereby to been notified in writing of this change.	ete performance gent. Or, if this confirm that the
Syst	nature of Registered Agent 10/27/11	
If signing on be	half of an entity:	
Matt	Jew Zi Frony, Eso	

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



November 10, 2011

Department of State Amended Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

RE: Leisureville Fairway Nine Association, Inc.

Leisureville Fairway Seven Association, Inc. Leisureville Fairway Six Association, Inc.

Dear Sir or Madam:

Please find enclosed our 3 firm checks for \$35.00 each, in connection with changes of registered agent for the above associations.

Sincerely,

Tara M. Denkin

Florida Registered Paralegal

/tmd

110 Southeast Sixth Street • Fifteenth Floor • Fort Lauderdale, Florida 33301
Post Office Box 14245 • Fort Lauderdale, Florida 33302
Tel 954.525.7500 • Fax 954.761.8475 • www.TrippScott.com

Fort Lauderdale • Tallahassee