718325

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)
Certified Copies	, Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

RANKO 3K



400029597124

03/02/04--01010--025 **35.00

FILED

OLINE LANGE STATE

SLUKE LANGE STATE

OLINE LANGE STATE

OLIN LAN

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Blair House South - A Condominium, Inc. (Name of corporation)	
DOCUMENT NUMBER: 718325	
The enclosed Statement of Change of Registered Office/Agent and fee are sul	omitted for filing.
Please return all correspondence concerning this matter to the following:	
Peter Lynch	
(Name of person)	•
Accord Management Service (Name of firm/company)	es, LLC
(Name of firm/company)	
D.O. Pay 460000	
P.O. Box 160068 (Address)	
Miami, FL 33116	
(City/state and zip code)	
For further information concerning this matter, please call:	
Robert H. Yaffe, Esq. at (305) 895-9000
(Name of person) (Area of	ode & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.	•
Amendment Section Ame Division of Corporations Divi P.O. Box 6327 409	et Address: Induct Section Ission of Corporations E. Gaines Street Islands F. J. 23399

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

.....

change is subm	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, to itted for a corporation organized under the laws of the State of Florida gistered office or registered agent, or both, in the State of Florida.	his state	ement c _ in or	_
1. The name of	the corporation: Blair House South - A Condominium Association, Inc.			
2. The principal	office address: 9100 West Bay Harbor Drive, Bay Harbor Islands, FL 33154			<u> </u>
3. The mailing a	address (if different): 9100 West Bay Harbor Drive, Bay Harbor Islands, FL 33154			
4. Date of incor	poration/qualification: 03/20/1970 Document number: 718325			
	d street address of the current registered agent and registered office on file with the runent of State:			
	David Roger	.	. •	
	5201 Blue Lagoon Dr., Suite 100		_	
	Miami, FL 33126	LLCri	F	т
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			R AM	F
	Robert H. Yaffe, Esq.	113. 1.5.1	£ ₹	O
	11900 Biscayne Boulevard, Suite 266	RAC	52	
	(P.O. Box or personal mailbox NOT acceptable)	- J.>		
	Miami, FL 33181	e :		÷
The street addred changed will be	ess of its registered office and the street address of the business office of its register e identical.	red ager	ıt, as	
Such change w the board, or th	as authorized by resolution duly adopted by its board of directors or by an officer s e corporation has been notified in writing of the change.	o autho	rized b	y
Land	Janet Ramerini, President Signature of an officer or director) Janet Ramerini, President (Printed or typed name and til	nei		
1 /	t 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 pen familiar with and accept the obligation of my position as registered agent. Or, if ely to reflect a change in the registered office address, I hereby confirm that the converting of this change.	-	nce of s cumen on has	my t is
10	(Signature of Registered Agent) (Signature of Registered Agent)	77.c		_
If signing on be	ehalf of an entity:			
Robert H. Yaff				<u>. </u>
·	(Typed or Printed Name) (Capacity)			

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