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ALLARS SEE, FLORIDA

FEB 03 2016

C. CARROTHERS

## COVER LETTER

TO: Amendment Section Division of Corporations

Ocean Point Association, Inc. Name of Corporation DOCUMENT NUMBER:\_ 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: Luis F. Navarro, Esq. Name of Contact Person Navarro Hernandez, P.L. Firm/Company P.O. Box 34-7650 Address Coral Gables, FL 33234 City/State and Zip Code lou@nhlawpl.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luis Navarro, Esq.

Name of Contact Person

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

## 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 statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of	f Florida	
1. The name of the corporation: Ocean Point Association, Inc.		
2. The principal office address: 345 Ocean Drive, Suite Office Miami Beach, FL 33139		
3. The mailing address (if different):		
4. Date of incorporation/qualification: Document number:		
5. The name and street address of the current registered agent and registered office on file Florida Department of State: (If resigned, enter resigned)	1	
David Rogel, Esq.	FALLAHASS	
121 Alhambra Plaza, 10th Floor		
Coral Gables, FL 33134	OF S	
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):	ORIDA Office OF	
Luis F. Navarro, Esq.		
66 W. Flagler Street, 6th Floor		
P.O. Box NOT acceptable  Miami, FL 33131		
The street address of its registered office and the street address of the business office of as changed will be identical.	its registered agent,	
Such change was authorized by resolution duly adopted by its board of directors or by a authorized by the board or the corporation has been notified in writing of the change.	in officer so	
Luis Navarro  Signature of an office or director  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 c performance of my duties, and I am familiar with and accept the obligation of my posit agent. Or, if this document is being filed merely to reflect a change in the registered of hereby confirm that the corporation has been notified in writing of this change.	ion as registered	
Signature of Registered Agent Date		
If signing on behalf of an entity:		
Luis Navarro		
Typed or Printed Name		

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

CR2E045 (03/12)