727755

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COVER LETTER

| TO: Amendment Section Division of Corporations | | | | |
|---|--|--|--|--|
| SUBJECT: Arlen House East Condominiu Name of Corpo | m Association, Inc. | | | |
| DOCUMENT NUMBER: 727 | 755 | | | |
| The enclosed Statement of Change of Registered Office/Ag | ent and fee are submitted for filing. | | | |
| Please return all correspondence concerning this matter to the | ne following: | | | |
| | | | | |
| Gary Mar | s | | | |
| Name of Contact | Person | | | |
| Lhuman Chastanh | Anna III D | | | |
| Hyman Spector Mars, LLP Firm/Company | | | | |
| | | | | |
| 150 West Flagler Stree | et, Suite 2701 | | | |
| Address | | | | |
| | | | | |
| Miami, Florida 33130 City/State and Zip Code | | | | |
| | | | | |
| jonathan@hsmattys.com E-mail address: (to be used for future annual report notification) | | | | |
| a man dadress. (to be asset for fatale | ammun report nonneutron) | | | |
| For further information concerning this matter, please call: | | | | |
| Jonathan Jaime at | (305) 371-4244 Arca Code & Daytime Telephone Number | | | |
| Name of Contact Person | 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 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

| statement of ch | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sange is submitted for a corporation organized under the laws of the State of \underline{F} for to change its registered office or registered agent, or both, in the State of Fl | lorida |
|---|--|---|
| 1. The name of | the corporation: Arlen House East Condominium Associati | on, Inc. |
| | office address: 100 Bayview Drive | |
| 4 | Sunny Isles Beach, Florida 33160 | |
| 3. The mailing a | address (if different): 100 Bayview Drive | |
| | Sunny Isles Beach, Florida 33160 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 4. Date of incor | poration/qualification: 10/10/1973 Document number: | 727755 |
| | I street address of the current registered agent and registered office on file with trment of State: (If resigned, enter resigned) | the . |
| | Akam On-Site, Inc. | |
| | 6421 Congress Avenue, Suite 110 | |
| | Boca Raton, Florida 33487 | 2011 F |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office | FILE 30 A SEURETARY OF SELAHASSEE |
| | Gary Mars, Esq. | ·_ ~1 |
| | 150 West Flagler Street, Suite 2701 P.O. Box NOT acceptable | 8: 54 STATE |
| | Miami, Florida 33130 | |
| The street addre | ss of its registered office and the street address of the business office of its be identical. | registered agent, |
| Such change wa authorized by th | is authorized by resolution duly adopted by its board of directors or by an one board, or the corporation has been notified in writing of the change. | officer so |
| yra Ole | Colland - Park of an officer or director you of Kurlington Printed or typed name and title | ACK-PRESIDENT |
| I hereby accept I further agree t of my duties, an document is beit corporation hat | the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and comp of am familiar with and accept the obligation of my position as registered ng filed merely to reflect a change in the registered office address, I hereby been notified in writing of this change. 12/19/1 Date Da | olete performance |
| If signing on bel | <u> </u> | |
| Ту | ped 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 * * *