

727940



MELLON FINANCIAL CENTER  
150 SOUTH PINE ISLAND ROAD  
SUITE 540  
PLANTATION, FLORIDA 33324

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

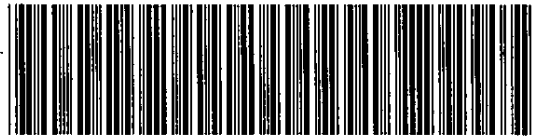
(Business Entity Name)

(Document Number)

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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: NATURA CONDOMINIUM NO. 2 ASSOCIATION, INC.
- 2. The principal office address: 3500 SW NATURA AVE APT 207  
DEERFIELD BEACH FL 33441
- 3. The mailing address (if different): SAME
- 4. Date of incorporation/qualification: 11/05/1973 Document number: 727940
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

GRIZZAFFI, CARL PRES  
3500 SW NATURA AVE APT 207  
DEERFIELD BEACH FL 33441

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

BAKALAR & EICHNER, P.A.  
150 SOUTH PINE ISLAND ROAD, SUITE 540  
(P.O. Box NOT acceptable)  
PLANTATION, FL 33324

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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.

  
 \_\_\_\_\_  
(Signature of an officer or director)

**Samuel J. Martello, Jr.**  
**CAM-Property Manager**  
 \_\_\_\_\_  
(Printed or typed name and title)  
Agent for Client

*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.*

  
 \_\_\_\_\_  
(Signature of Registered Agent)

9/8/08  
 \_\_\_\_\_  
(Date)

If signing on behalf of an entity:  
BAKALAR & EICHNER, P.A.  
 \_\_\_\_\_  
(Typed or Printed Name)

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