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SECRETARY OF STATE
ALL AHASSEF FLORIO

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: CASTLE #16 CONDOM/N/UM, INC. Name of Corporation			
DOCUMENT NUMBER: 728/97			
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:			
Name of Contact Person CHAPNICK COMMUNITY ASSOCIATION LAW, P. A Firm/Company T301 NONTH FEDERAL HIGHWAY #250 Address Boca RATON FL 33487 City/State and Zip Code M CHAPNICK @ CCALPA, Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call: MCCHAEL E CIFAPUICE at (J61) 330 - 3096 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

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 FLOR (PA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CASTLE #16 CONDOM/NIOM, INC
2. The principal office address: 4740 NW 21 ST STREET #311
LAUDERHILL FL 38313
3. The mailing address (if different):
4. Date of incorporation/qualification: 1>15/1973 Document number: 7>8/1973
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
MIRZA BASULTO + ROBBINS, LLP
14160 NW 77 COUPT
MIAMI LAKES, FL 330/6
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): CHAONICK COMMUNITY ASSOCIATION LAW, FIG. 1975 FIG. 1975 P.O. Box NOT acceptable
BAL NOATH FORD HOWALL #200
P.O. Box NOT acceptable P.O. Box NOT acceptable P.O. Box NOT acceptable
FORD RATION, FL 33487
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.
Probert Signature of an officer 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 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.
Det Till les
Signature of Registered Agent Date
If signing on behalf of an entity:
Michel Chapick
Typed of Printed Name

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