

729390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

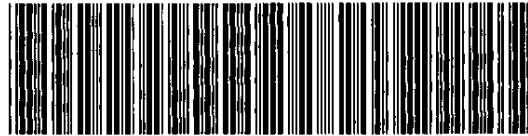
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900184023309

08/09/10--01043--011 **35.00

APPROVED
AND
FILED

10 AUG -9 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/11/10
R990
12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LIME BAY CONDOMINIUM, INC. NO. 3
Name of Corporation

DOCUMENT NUMBER: 729390

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:

Guy M. Shir, Esq.
Name of Contact Person

Kahan Shir, PL
Firm/Company

1800 N.W. Corporate Blvd. Suite 200
Address

Boca Raton, FL 33431
City/State and Zip Code

gshir@kahanshir.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Guy M. Shir, Esq. at (561) 999-5999
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LIME BAY CONDOMINIUM, INC. NO. 3
2. The principal office address: PHOENIX MGMT. SERVICES 4800 N. STATE ROAD 7 #105
LAUDERDALE LAKES FL 33319 US
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 4/18/1974 Document number: 729390

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)

BROUGH, DAVID ESQ. BROUGH, CHADROW & LEVINE
1900 NO. COMMERCE PKWY.
WESTON, FL 33326

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

Kahan Shir, PL
1800 N.W. Corporate Blvd. Suite 200
P.O. Box NOT acceptable
Boca Raton, FL 33431

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.

Marsha Feilberg
Signature of an officer or director

MARSHA FEILBERG PRES.
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.

[Signature]
Signature of Registered Agent

7/26/10
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

APPROVED
AND
FILED
10 AUG -9 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA