

733418

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

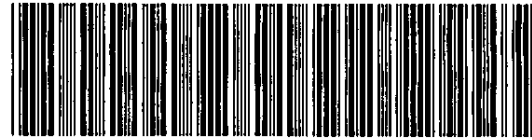
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Changing RA office

DEC 22 2016

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PAUL A. MCKENNA, ESQ
ANDREW BRAAKSMA, ESQ
ALSO A MEMBER OF THE MINNESOTA BAR

November 18, 2016

State of Florida
Division of Corporations
Amendment Section
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Registered Agent Change of Address

Dear Sir or Madam,

Our office is the registered agent for numerous non-profit corporations more specifically named as follows:

<u>Corporate Name</u>	<u>Document Number</u>
✓ Village Del Mar Condominium	N03000002434
✓ Village Del Mar Marina Condominium	N06000002290
✓ Ludlum Lake Townhouse Section Two	729084
✓ Aragon Plaza Condominium Association	N03000000405
✓ The Palms of Miami Condominium	N03000005479
✓ Naranja Lakes Condominium No. Five	725252
✓ The Townhomes at Villas Del Campo HOA	N04000002034
✓ Centennial Homeowners Association	N28188
✓ Villas at Carmel No. 2	N03000006484
✓ Windward Isles HOA	N05000010324
✓ Marbella Bay HOA	N04000004700
✓ Floridian Isles II HOA	N05000003288
✓ Pebblebrook II HOA	N04000010408
✓ Portofino Pointe Property Owners	N04000011214
✓ Floridian Bay Estates II at Waterstone II HOA	N05000003287
✓ Stonebrook II HOA	N04000010411
✓ Portofino Oaks	N04000011206
✓ Portofino Palms	N04000011201
✓ Princetonian by the Park	N41592
✓ Half Moon Towers Condominium	733418

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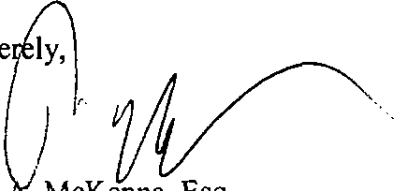
Our office moved and we would like to update our mailing address as registered agent for all of the above corporations. The Registered Agent should read as follows:

Paul A. McKenna and Associates, P.A.
703 Waterford Way, Suite 220
Miami, FL 33126

PAUL A. MCKENNA, ESQ
ANDREW BRAAKSMA, ESQ
ALSO A MEMBER OF THE MINNESOTA BAR

Should you have any questions or need anything further, please don't hesitate to contact me at the letterhead telephone number by dialing ext. 209.

Sincerely,

A handwritten signature in black ink, appearing to be 'PAM', with a long, sweeping horizontal line extending to the right.

Paul A. McKenna, Esq.
For the Firm

PAM/eb

Enclosures: Check number 7589.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HALF MOON TOWERS CONDOMINIUM ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: 733418

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:

PAUL A. MCKENNA, ESQ.

Name of Contact Person

PAUL A. MCKENNA & ASSOCIATES, P.A.

Firm/Company

703 WATERFORD WAY, SUITE 220

Address

MIAMI, FL 33126

City/State and Zip Code

PAUL@PMCKLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELIZABETH BARREIRO

Name of Contact Person

305 662-9908

at () 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2016

PAUL A. MCKENNA, ESQ.
PAUL A. MCKENNA & ASSOCIATES P.A.
703 WATERFORD WAY, SUITE 220
MIAMI, FL 33126

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

You will need to complete a registered agent change form for each corporation you are changing the address of the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 216A00025413

RECEIVED
16 DEC 20 PM 12:14
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: HALF MOON TOWNERS CONDOMINIUM ASSOCIATION, INC.
2. The principal office address: 5055 NW 7 STREET, STE 101
MIAMI, FL 33126
3. The mailing address (if different): 5055 NW 7 STREET, STE 101
MIAMI, FL 33126
4. Date of incorporation/qualification: 07/29/1975 Document number: 733418
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)
PAUL A. MCKENNA & ASSOCIATES, P.A.
1360 S. DIXIE HWY, STE 100
CORAL GABLES, FL 33146

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

PAUL A. MCKENNA & ASSOCIATES, P.A.
703 WATERFORD WAY, SUITE 220
P.O. Box NOT acceptable
MIAMI, FL 33126

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SECRETARY OF STATE

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

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 of Registered Agent

12-13-16
Date

If signing on behalf of an entity:

PAUL A. MCKENNA, ESQ.

Typed or Printed Name

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