## 751021

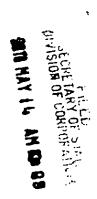
(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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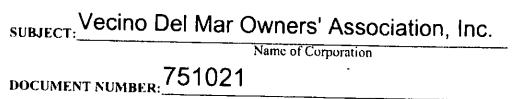


MAY 16 2018 I MICHAIR

## **COVER LETTER**

TO:

Amendment Section Division of Corporations



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:

Ann Lefkowitz	
Name of Contact Person	_
Vecino Del Mar Owners' Association, Inc.	
Firm/Company	_
2350 NE 135th Street	
Address	
North Miami, FL 33181	
City/State and Zip Code	_

Ann.Lefkowitz@fsresidential.com

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

For further information concerning this matter, please call:

Melissa Garcia

Name of Contact Person

at (786 ) 369-8879

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

CR2E045 (03/12)

## 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 companying page 1.
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: Vecino Del Mar Owners' Association, Inc.
2. The principal office address: 2350 NE 135th Street, North Miami, FL 33181
3. The mailing address (if different):
4. Date of incorporation/qualification: 02/13/1980 Document number: 751021
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)
Glazer & Associates, PA
3113 Stirling Road, Suite 201
Hollywood, FL 33312
. 6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):  Gursky Ragan, P.A.  14 NE 1st Avenue, Suite 703
14 NE 1st Avenue, Suite 703
Miami, FL 33132
The street address of its registered office and the street address of the business office of its registered annual
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 other writerester  DI. Barbara Sewerin, Treasurer Printed or typed name and inte
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 agent. Or, if his adjument 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.
If signing on health of an entity:
Darrin Gursley Typed or Printed Name
FILING FEE: \$35.00 * * *

Make checks payable 10 Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl. 32314 CR2E045 (03/12)