## 752124

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SEP 1.1 2014 C. CARROTHEPS

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: Miami Lakes Loch Isle Homeowners' Association, Inc.			
Name of Corporation			
DOCUMENT NUMBER: 752124			
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:			
Dave Oliver			
Name of Contact Person			
Miami Lakes Loch Isle Homeowners' Association, Inc.			
Firm/Company			
15314 Loch Isle Dr. E.			
Address			
Miami Lakes, FL 33014			
City/State and Zip Code			
crwickenden@gmail.com  E-mail address: (to be used for future annual report notification)			
2 man and the column			
For further information concerning this matter, please call:			
Charles Wickenden Name of Contact Person			
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

	,	nized under the laws of the State of Florida	
	· · · · · · · · · · · · · · · · · · ·	ered agent, or both, in the State of Florida.	
1. The name of t	he corporation: Miami Lakes Loch	Isle Homeowners' Association, Inc.	
2. The principal	office address: 15314 Loch Isle D	r. E., Miami Lakes, FL 33014	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 04/22/1980	Document number: 752124	
	street address of the current registered attment of State: (If resigned, enter resigned	agent and registered office on file with the ed)	
	Canner, Brody & and Yan, Ll	LC. <u>销</u> 级 <u></u>	
	5979 N.W. 151 St., Suite 109	B S while S	
•	Miami Lakes, FL 33014	C	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Dave Oliver	5 5	
15314 Loch Isle Dr. E.			
P.O. Box NOT acceptable  Miami Lakes, FL 33014			
The street addre	ess of its registered office and the street be identical.	address of the business office of its registered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted the board or the corporation has been no	d by its board of directors or by an officer so stiffed in writing of the change.	
A any	Shuw	Dave Oliver, President Printed or typed name and title	
I hereby accept	the appointment as registered agent an		
Nau	e/ Thrie	09/02/2014	
_	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Ty	yped or Printed Name		

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