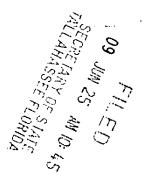
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## **COVER LETTER**

Division of Corporations SUBJECT: Horizons West Condominium No. 1 Association, Inc. Name of Corporation 755575 **DOCUMENT NUMBER:** 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: Bridgette E. Bonet, Esq. Name of Contact Person Association Law Group, P.L. Firm/Company 1666 Kennedy Causeway, Suite 305 North Bay Village, FL 33141-4189 City/State and Zip Code bbonet@algpl.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bridgette E. Bonet Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Amendment Section **Mailing Address:** Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

Amendment Section

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this rion organized under the laws of the State of	
	or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Horizons \	West Condominium No. 1 Association, Inc.	
	3 Ave. Road, Suite 221, Miami, FL 33186	
3. The mailing address (if different): 11981 S	SW 144 Court, Suite 201, Miami, FL 33186	
4. Date of incorporation/qualification: 12/	16/1980 Document number: 755575	
5. The name and street address of the current re Florida Department of State: (If resigned, en	gistered agent and registered office on file with the er resigned)	
Robert Paige, Esq.		
9500 South Dadeland B	9500 South Dadeland Boulevard, Suite 550	
Miami, FL 33156		
6. The name and street address of the new regis (if changed):	tered agent (if changed) and /or registered office	
Association Law Group,		
1666 Kennedy Causewa	ay, Suite 305	
	P.O. Box NOT acceptable	
North Bay Village, FL 33	3141-4189	
The street address of its registered office and as changed will be identical.	the street address of the business office of its registered agent,	
Such change was authorized by resolution du authorized by the board or the corporation has	ly adopted by its board of directors or by an officer so as been notified in writing of the change.	
Signature of an officer or director	Bea Loving President	
I hereby accept the appointment as registered I further agree to comply with the provisions of my duties, and I am familiar with and acced document is being filed merely to reflect a chacorporation has been notified in writing of the	l agent and agree to act in this capacity. of all statutes relative to the proper and complete performance pt the obligation of my position as registered agent. Or, if this ange in the registered office address, I hereby confirm that the is change.	
Signature of Registered Agent	June 1,2009	
If signing on behalf of an entity:		
Typed or Printed Name	<del></del>	
( )	LING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314