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COVER LETTER

TO: Amendment Division of	nt Section f Corporations						
SUBJECT:	Patio Village Homeowne Name of C	ers Association, Inc.					
DOCUMENT NU	MBER:	755736					
The enclosed States	ment of Change of Registered Offic	e/Agent and fee are submitted for filing.					
Please return all co	rrespondence concerning this matter	to the following:					
	Michael Bakalar, E	Business Manager					
	Name of Co	ntact Person					
	Bakalar & As	sociates, PA					
	rimice	mpany					
	150 South Pine Isla	nd Road, Suite 540					
	Add						
	Plantation	FI 33324					
	City/State ar	FI 33324 d Zip Code					
	rsherwin@miamim	anagement com					
	E-mail address: (to be used for f						
For further informa	tion concerning this matter, please of	all:					
Michael Ba	akalar, Business Manager	at (954) 475-4244					
Nan	ne of Contact Person	at (954) 475-4244 Area Code & Daytime Telephone Number					
Enclosed is a \$35.0	0 check made payable to the Depart	ment 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 REG	OR CORPORAT	CE OR REGIST TIONS	TERED AS	CEIVED
	rovisions of sections 607.0.				
	ge is submitted for a corpo		-	(* - 7	
in order	to change its registered off	ice or registerea a	gent, or both, th t	ne State of Tror	180.
	e corporation: Patio Vil				
2. The principal of	ffice address: 1145 Saw	grass Corporat	te Parkway, S	unrise, Fl 33	323
3. The mailing add	dress (if different): Same				
4. Date of incorpo	ration/qualification:1	2/31/1980	Document number	er:	755736
	street address of the current ment of State: (If resigned,		nd registered offic	ce on file with t	he
<u> </u>	Becker and Poliakoff			·	0 000
<u>3</u>	3111 Stirling Road				900
<u> </u>	Ft. Lauderdale, Fl 333	312			5 18 A
6. The name and s (if changed):	treet address of the new re	gistered agent (if c	hanged) and /or re	egistered office	090CT -5 PAIC: 0
<u>_</u> E	Bakalar & Associates	, PA			= 5
<u>-</u>	150 South Pine Island	Road, Suite 5			
<u> </u>	Plantation, Fl 33324				
The street address as changed will be	s of its registered office ar	nd the street addre	ss of the busines	s office of its re	egistered agent,
Such change was authorized by the	authorized by resolution board or the corporation	duly adopted by it	s board of direct in writing of the	ors or by an off change.	ficer so
- Grafture	okan office or director		KLQU 5	Lu REH Z	- PRESIDENT
Ihereby accept the I further agree to of my duties, and document is being corporation has b	ne appointment as register comply with the provision I am familiar with and ac giled merely to reflect a gen notified in writing of	red agent and agr ns of all statutes re cept the obligatio change in the regi this change.	•		ete performance gent. Or, if this confirm that the
Signat	ture of Registered Agent			/17/2009 Date	
If signing on beha	alf of an entity:				
	P. Bakalar, Esq.				
1 урс	ed or Printed Name	EH INC EEE, co	F 00 + + +		

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (8/05)