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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: TARA	A HOMEOWNERS'			ON, INC	<u>C.</u>
DOCUMENT NUMBER		756882	)		
The enclosed Statement of	Change of Registered Office	ce/Agent a	nd fee a	re submit	ted for filing.
Please return all correspon	dence concerning this matte	er to the fo	llowing	:	
	ROBERT	E. PAIG	Œ		
	Name of Co	ntact Pers	on		<del></del>
	PAIGE LAW	GROUP	P.A.		
<del></del>		ompany	1		<del></del>
	9500 South Dade	Jand Blu	d Sta	550	
		dress	u. Ste	<u> </u>	<del></del>
	Miami, Flo	orida 331	56		
	City/State a	ind Zip Co	de		
	email@rober	tepaige.	com		
E-mai	address: (to be used for	future and	nual rep	ort notif	ication)
For further information co	ncerning this matter, please	call:			
	T E. PAIGE	at (	305	)	670-0020 me Telephone Number
Name of C	ontact Person	Ar	ea Code	& Dayti	me Telephone Number
Enclosed is a \$35.00 check	c made payable to the Depa	rtment of S	State.		
<u>M</u>	ailing Address:		Street	Address:	
$\overline{A}$	mendment Section			dment Se	
	ivision of Corporations				orporations
	O. Box 6327			n Buildii	•
1	allahassee, FL 32314				e Center Circle
			ı anar	nassee, F	L 323UI

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

tatement 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.	
. The name of the corporation: TARA HOMEOWNERS' ASSOCIATION, INC.  . The principal office address: 5801 Blue Lagoon Drive, #310	_
Miami Florida 33156	
. The mailing address (if different):	_
. Date of incorporation/qualification: 03/20/1981 Document number: 756882	_
. 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)	
SKRLD, INC.	
201 ALHAMBRA CIRCLE, #1102	
CORAL GABLES, FLORIDA 33134	
The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
ROBERT E. PAIGE, ESQ.	
9500 South Dadeland Blvd., Ste 550	
P.O. Box NOT acceptable  Miami, Florida 33156	
the street address of its registered office and the street address of the business office of its registered agent, s changed will be identical.	
uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.	
Signature of an officer of director  R. Charles Frinted or typed name and title	
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete performance f my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.	
### AUGUST 05, 2010	
Signature of Registered Agent Date	
signing on behalf of an entity:	
ROBERT E PAIGE Typed or Printed Name	

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