757764

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SEURETARY OF STATE
ALL AHASSEE, FLORIDA

ATTION TO

NOV T.3'MON(4)





MARIA VICTORIA ARIAS MARIAS@SRHL-LAW.COM

REPLY TO CORAL GABLES OFFICE

October 24, 2014

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VIA FEDERAL EXPRESS

Division of Corporations Amendment Section 409 E. Gaines Street Tallahassee, FL 32399

> RE: LA JOLLA HOMEOWNERS ASSOCIATION, INC.

("Association")

To Whom it May Concern:

The undersigned law firm represents La Jolla Homeowners Association, Inc. ("Association"). Enclosed herewith are the original and a copy of the Statement of Change of Registered Office or Registered Agent or Both for Corporations ("Statement") and a check in the sum of Thirty-Five and No/100 Dollars (\$35.00). Please date stamp the copy and return to the undersigned in the enclosed self-addressed stamp envelope.

Should you require anything further, please do not hesitate to contact my office.

Very truly yours,

SIEGFRIED, RIVERA, HYMAN, LERNER,

DE LA TORRE, MARS & SOBEL, P.A.

Maria Victoria Arias

MVA/bly **Enclosures** Cc: Manager

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201 Alhambra Circle Eleventh Floor Coral Gables, Florida 33134 Miami-Dade: 305.442.3334 Fax: 305.443.3292 Toll Free: 800.737.1390

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, ange is submitted for a corporation organized under the laws of the State ofer to change its registered office or registered agent, or both, in the State of Florida.	this	
1. The name of	the corporation: LA JOLLA HOMEOWNERS ASSOCIATION, INC	٥.	
2. The principal	office address: 9000 SW 152nd STREET, #102, MIAMI, FL 3315	6	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification; 04/28/1981 Document number: 757764		
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
		14(
828 NW 9th COURT		RET	
	MIMAI, FL 33136	SSEE SSEE	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		OF STAT	OCT 27 AM 4: UD
	SKRLD, INC.	D E	ن
	201 ALHAMBRA CIRCLE, 11th FLOOR		
P.O. Box NOT acceptable CORAL GABLES, FL 33134			
The street addra	ess of its registered office and the street address of the business office of its registe be identical.	red agent,	,
Such change we authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer s he board, or the corporation has been notified in writing of the change.	0	
- De Cu Signati	real Homitton President President Printed or typed name and title		
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as regi is document is being filed merely to reflect a change in the registered office addres that the corporation has been notified in writing of this change.	stered ss, I	
- Lui	Inature of Registered Agent		
If signing on be	chalf of an entity: A. Lerner		
Т	yped or Printed Name		

* * * FILING FEE; \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

ATTROVED