## 764887

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## **COVER LETTER**

TO: Amendment Section Division of Corporations								
SUBJECT: Linton Ridge Condominium Association, Inc.  Name of Corporation								
DOCUMENT NUMBER: 764887								
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:								
Michael D. Birnholz, Esq.  Name of Contact Person								
Name of Contact Person								
Michael D. Birnholz, P.A.								
Firm/Company								
1025 Kane Concourse, Suite 203								
Address								
Bay Harbor Islands, FL 33154 City/State and Zip Code								
City/State and Zip Code								
michael@birnholzlaw.com								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
Michael D. Birnholz at 305 868-5368  Name of Contact Person Area Code & Daytime Telephone Number								
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

the state of the second CR2E045 (8/05)

TO:

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

1. The name of the corporation: Linton Ridge Condominium Association, Inc.  2. The principal office address: Clo Michael D. Birnholz, P.A., 1025 Kane Concours Suite 203, Bay Harbor Islands, FL 33154  3. The mailing address (if different):  4. Date of incorporation/qualification: 10/4/1982 Document number: 764887	statement of cha	provisions of sections 607,0502 inge is submitted for a corporat r to change its registered office	ion organize	d under the laws o	f the State of _	Floria			
Suite 203, Bay Harbor Islands, FL 33154  3. The mailing address (if different):  4. Date of incorporation/qualification: 10/4/1982 Document number: 764887	1. The name of t	the corporation: Linton Rid	ge Conde	ominium Ass	ociation, I	nc.			
3. The mailing address (if different):  4. Date of incorporation/qualification: 10/4/1982 Document number: 764887	2. The principal	office address: c/o Mick	IACL D.	Birnholz,	P.A., 10	25 Ka	ine Co	ncoul	[se
4. Date of incorporation/qualification: 10/4/1982 Document number: 764887	Suite 20	13, Bay Harbor Is	lands,	FC 33154	<u> </u>				
	3. The mailing a	ddress (if different):	<del></del>					<del></del>	,
	4. Date of incorporation/qualification: 10/4/1982 Document number:					764887			
<ol> <li>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)</li> </ol>				nt and registered of	ffice on file wi	th the			
David Pugh, Gallup Accounting		David Pugh, Gallup Acc	ounting			_			
817 George Bush Blvd.		817 George Bush Bivd.					Z SE	5	
Delray Beach, FL 33483		Delray Beach, FL 33483				- -	A CRET	SEP 2	~
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Michael D. Birnholz, Esq.		street address of the new regis	lered agent (i	if changed) and /or	r registered off	îce	ARY OF	0 3	FILLU
Michael D. Birnholz, Esq.		Michael D. Birnholz, Esc	1.			_	STA MESTA		
1025 Kane Concourse, Suite 203		1025 Kane Concourse,	Suite 203				<b>3</b> 7	Ö	
P.O. Box NOT acceptable							-		
Bay Harbor Islands, FL 33154		Bay Harbor Islands, FL	33154			<del></del>			
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	The street address changed will	ess of its registered office and be identical.	the street ad	dress of the busin	ess office of it	ts register	ed agent,		
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	Such change was authorized by the	as authorized by resolution du ne board, or the corporation ha	y adopted b s been notif	y its board of dire	ectors or by an he change.	officer s	0		
Standure of an officer or director Printed or typed name and life	Signatu	re of an officer or director		Jo C	r typed name and h	Coff	te		
hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered to comply with the provisions ad I am familiar with and acce ng filed merely to reflect a ch s been notified in writing of th	agent and cof all statute of the obligating in the risk risk change.	agree to act in this is relative to the p ution of my position registered office a	s capacity. proper and con on as registere ddress, I here	nplete per ed agent. hy confiri	rformanc Or, if thi n that the	e S	
mic s. rife 9/8/2010	mic	s. rife	-						
Signature of Registered Agent Date	Sig	nature of Registered Agent			Date				
If signing on behalf of an entity:	If signing on be	half of an entity:	/						
Typed or Printed Name		voed or Printed Name	_						

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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