## 765051

(Re	equestor's Name)	
(Ad	ldress)	<u>-</u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e <b>#</b> )
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		į
:		

Office Use Only



600272355266

05/04/15--01011--011 \*\*35.00

15 MAY -4 AM 10: 59

CY. 8 15

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: NORTHPOINTE HOMEOWN Name of Co	ERS ASSOCIATION AT
DOCUMENT NUMBER: 7	'65051
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Russell M. Ro Name of Con	obbins, Esq.
Mirza Basulto &	
14160 Palmetto Fron	
Miami Lakes, F City/State an	Florida 33016 d Zip Code
rrobbins@mbrl	
E-mail address: (to be used for fu	iture annual report notification)
For further information concerning this matter, please-c	all:
Russell M. Robbins, Esq.	at ( 954 ) 510-1000 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departs	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

TO:

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Flore statement of change is submitted for a corporation organized under the laws of the State in order to change its registered office or registered agent, or both, in the State	of Florida
1. The name of the corporation: NORTHPOINTE HOMEOWNERS ASS 2. The principal office address: 1576 NE 205 TERR., # 221  NORTH MIAMI BEACH, FL 33179	California Llu
3. The mailing address (if different):	
4. Date of incorporation/qualification: 05/22/1998 Document number:	765051
5. The name and street address of the current registered agent and registered office on fill Florida Department of State: (If resigned, enter resigned)	e with the
PAEZI, MARIO	
21138 NE 5th PLACE	
NORTH MIAMI BEACH, FL. 33179	
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):	
Mirza Basulto & Robbins,.LLP.	
14160 Palmetto Frontage Road, Suite 22	<u> </u>
P.O. Box NOT acceptable  Miami Lakes, Florida 33016	
The street address of its registered office and the street address of the business office as changed will be identical.  Such change was authorized by resolution duly adopted by its board of directors or be authorized by the board of the corporation has been notified in writing of the change	y an officer so
Agriculture of the dispersion of the provisions of all statutes relative to the proper and first and I and I am familiar with and accept the obligation of my position as registered of my dulies, and I am familiar with and accept the obligation of my position as regist documentars being New merely to reflect a change in the registered office address, I corporation has been notified in writing of this change.  Separation Registered Agent	
If signing on behalf of an entity:	
Russell M. Robbins, Esq., Partner Typed 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,	