

769900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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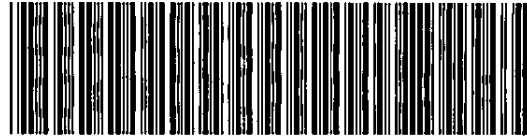
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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JAN 14 2015

T. CARTER

**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, Florida Statutes, this statement 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.

1. The name of the corporation: Quatrain Condominium II Association, Inc.
2. The principal office address: 20055 NE 3rd Court, Gatehouse
Miami, FL 33179
3. The mailing address (if different): Development Consultants, Inc.d/b/a Association Services of Florida
10112 USA Today Way, Miramar, Florida 33025
4. Date of incorporation/qualification: 08/19/1983 Document number: 769900
5. 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)

SOUTH FLORIDA CONDOMINIUM MANAGEMENT, INC.

3100 NW 72 AVENUE, Suite 113

MIAMI, FL 33122

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Becker & Poliakoff, P.A., Carlos F. Martin, Esq.

121 Alhambra Plaza, 10th Floor

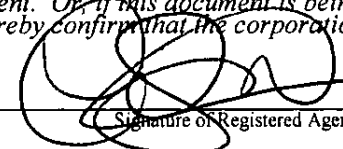
P.O. Box NOT acceptable

Coral Gables, FL 33134

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

I 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.


Signature of Registered Agent

P. Scott Maxwell
Printed or typed name and title

1/2/2015
Date

If signing on behalf of an entity:

Carlos F. Martin
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, FL 32314

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