

811022

CHERYL J. LEVIN, P.A.  
COURTYARD BUSINESS CENTER  
4694 NW 103<sup>rd</sup> AVENUE  
Sunrise, Florida 33351-7970

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

400004732304--9  
-12/19/01--01024--004  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in
- Pick up time
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

01 DEC 19 AM 11:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent *address*
- Dissolution/Withdrawal
- Merger

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

*Cheryl Levin  
gave authority  
to correct name  
12/28/01 ad*

Examiner's Initials *AL 12/27*

### STATEMENT OF CHANGE OF REGISTERED OFFICE FOR CORPORATIONS

Pursuant to the provisions of section 607.0502(3), 617.0502(3), 607.1508(2), or 617.1508(2), Florida Statutes, the undersigned registered agent of a corporation organized under the laws of the State of FLORIDA submits the following statement in order to change the registered office in Florida.

1. The name of the corporation: Orleans Chateau and Villas Inc.

2. The street address of the current registered office:

Cheryl J. Levin, P.A.  
10226 NW 47th Street  
Sunrise, Fla. 33351-7970

3. The street address of the new registered office:

CHERYL J. LEVIN, P.A.  
Courtyard Business Center  
4694 NW 103rd Avenue  
Sunrise, FL. 33351-7970

FILED  
01 DEC 19 AM 11:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The corporation has been notified in writing of this change.

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

Date: 7/25/08 ~~to~~ 12/17/01

[Signature]  
(Signature of Registered Agent)

Cheryl J. Levin  
(Printed or Typed Name)

Filing Fee: \$35.00

Make checks payable to Florida Department of State and mail to:  
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314