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From:

Account Name

: CORPORATION SERVICE COMPANY / ACI+

Account Number : 120000000195 Phone

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REGISTERED AGENT CHANGE

HARONDA REALTY, INC.

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

to change its re	itted for a corporation organized under the laws of the State of FLORIDA gistered office or registered agent, or both, in the State of Florida NEEDNDA BEALTY INC	in order		
	the corporation: HARONDA REALTY, INC.			
2. The principal	doffice address: 1899 N.E. 164TH ST., N. MIAMI BEACH, FL 33162-410.	<u> </u>		
3. The mailing	address (if different): 1300 NORTH FEDERAL HWY., STE. 212, BOCA RATON,	FL 33432		
4. Date of incom	poration/qualification: 11/25/1986 Document number: 544167		-:	
	d street address of the current registered agent and registered office on file with the atment of State:			
	PAUL R. GHOUGASIAN			
	1300 NORTH FEDERAL HWY., STE. 212			~
	BOCA RATON, #L 33432	7 P.S.	40	
The name an (if changed):	d street address of the new registered agent (if changed) and for registered office	ECRETARY OF STAT	JUN 15 PH	FIL
	HARRY A. LINET	E. OH	-0 - X	O
	9610 Griffin Road	FIO	2:09	
	(M.O. Box or personal multipox NOT acceptable) Cooper City, FL 33328		60	
The street addr	cas of its registered office and the street address of the business office of its registered identical.	ed agent, as		
	as authorized by resolution duly adopted by its board of directors or by an officer so e corporation has been notified in writing of the change.			
10	MAN SURE OF GREEN OF THE STATE	5770f-		
=	the appointment at registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performalism with and accept the obligation of my position as registered agent. Or, if it is to the proper in the registered affice address. I hereby confirm that the corporating of this change in the registered affice address. I hereby confirm that the corporating of this change.		·	⊸ •
By: X IX	(Signature of Registered Agent)	·		
t It signing on be	balf of an entity:			
				
	(Typed or Printed Name) (Capacity)		- : .	-

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

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahasses, FL 32314