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LAW OFFICES DANIEL S. CARUSI, P.A.

517 SOUTHWEST FIRST AVENUE FORT LAUDERDALE, FLORIDA 33301-2803

DANIEL S. CARUSI

(954) 527-0101 Facsimile (954) 524-4169 dcarusi@bellsouth.net

August 28, 2003

Division of Corporations Department of State P O Box 6327 Tallahassee, FL 32314

RE: Hillsboro Condominiums, LLC
A Florida Limited Liability Company
Doc # L01000014382
Change of Registered Agent
Our file No. 03-1390

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Dear Sir:

Enclosed please find the original and one (1) copy of Statement of Change of Registered Office or Registered Agent or both for Limited Liability Company for filing in connection with Hillsboro Condominiums, LLC. Also enclosed is check # 6667 for \$25.00 for filing fees. Please acknowledge receipt.

Thank you for your prompt attention.

Very truly yours,

Cynthia Lindo, Secretary to DANIEL S. CARUSI, ESQ.

ENTRY STATE

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is:	HILLSBORO CONDOMINIUMS, LLC		
2. The mailing address of the limited liability con Brookline, MA 02445			
August 24, 2001	L01000014382		
3. Date of filing/registration in Florida	4. Document number		
5. The name of the registered agent and the register Florida Department of State:	ered office address as shown on the records of the		
CorpDirect	Agents		
	Name Idian Street, LOwer Level Iddress See, FL 32301 Itate and Zip Ent and/or office: Isi, Esq. ame		
Address Tallahassee, FL 32301			
City, S	tate and Zip		
6. The name and address of the new registered age	ent and/or office:		
Daniel S. Carr	ısi, Esq.		
	SOM SOM		
517 SW First i			
Fiorida street address	(P.O. Box NOT acceptable)		
Ft. Lauderdale,	FL 33301		
City, Sta	ate and Zip		
and the highest office of the registered egent will	de, the Florida street address of the registered office		
(Signature of a member or authorized representative of a member			
Steven Vitiello	-		
(Printed or typed name of signee)			
I hereby accept the appointment as registered agcomply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S. Or, if this document is being find address, I hereby confirm that the limited liability (Signature of Registered Agent)	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent as provided for in led to merely reflect a change in the registered office company has been notified in writing of this change.		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

FILING FEE: \$25.00