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Certified Copies	Certificates of Status &	
Special Instructions to Filing Officer:		
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	A. LUNT	
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EXAMINER		

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: 80/1 ABBOTT Avenue of Limited	Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
MARIA BOMEZ.  Name of Person	
Name of Person  The Condo Management  Firm/Company	ZIJIS AUG -5  SECRETAR TALLAHASS
4538 Colliss Ave, +	m ·
Mum Black M, 3314	<u>/</u>
The Condum And Ger Gall E-mail address: (to be used for future annual report notification	i Com
For further information concerning this matter, plea	se call:
MANZIA BOMEZ at (3	305 377-8687.  Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following amo	unt:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

## 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. Name of the limited liability company: 80/1 An	BBOTT Avenue LC	
2. (a) Principal office address of limited liability comp	any: 8011 ABBOTT AVE CCC	
(Note: MUST BE STREET ADDRESS)	Clo The condo management Les 38 Collins Au #501 MIAMI Beach, F1. 33141	
(b) Mailing address of limited liability company:	co The condo management	
(Note: MAY BE POST OFFICE BOX)	clo The Cendo Management 10538 COLLINS AND, 4501 MIAMI BON, CL. 33141	
04/08/2005	L05000034571	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	William Peraz	
Registered Office Address:	Clome condo management	
	220 715T Swite 200- miami Beray, 9, 33141	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		
<b>NEW</b> Registered Agent:	010 The condo management	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10538/01/105 Ave #501	
	Miami Beach ,FL 33141	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.		
Signature of a member or authorized representative of a member	— Us I	
William Peaza	SEE.	
Printed or typed name of signee  I hereby accent the appointment as registered agent as	ad agree to act in this canacity Phyrikan agree in	
I hereby accept the appointment as registered agent and agree to act in this capacity Efurther agree to comply with the provisions of all statutes relative to the proper and complete performance of the duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address; thereby confirm that the limited liability company has been notified in writing of this change.		
Signature of Registered Agent		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		

INHS18 (05/08)