NC1000003187

(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Q. SILAS	
First Contract	
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Office Use Only



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SECRETARY OF STATE

COVER LETTER

Amendment Section

TO:

Division of Corporations SUBJECT: VILLA ENCANTADA CONDOMINIUM NO. 3 ASSOCIATION, INC. Name of Corporation DOCUMENT NUMBER: N01000002187 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HUGO L. GARCIA, ESQ. Name of Contact Person FLORIDA GENERAL COUNSEL, P.A. Firm/Company 3401 NW 82 AVE, SUITE 360 Address DORAL, FL 33122 City/State and Zip Code HGARCIA@GENERALCOUNSELFL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 704-2500 Area Code & Daytime Telephone Number HUGO L. GARCIA, ESQ. Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State.

> Mailing Address: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607,0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of FLORIDA r to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: VILLA ENCANTADA CONDOMINIUM NO. 3 ASSOCIATION, INC.
	office address: c/o CARIBBEAN PROPERTY MGMT t, SUITE 102, Miami, FL 33186
3. The mailing a	ddress (if different):
	poration/qualification: 03/28/2001 Document number: N01000002187
	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	Carlos A. Triay, P.A.
	2301 NW 87TH AVE. SUITE 501
	MIAMI. FL 33172
6. The name and (if changed):	FLORIDA GENERAL COUNSEL, P.A. PO Box NOT acceptable PORAL FL 33122
	FLORIDA GENERAL COUNSEL, P.A.
	3401 NW 82 AVE, SUITE 360
	P O Box NOT acceptable
	DORAL, FL 33122
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so lie board, or the corporation has been notified in writing of the change.
·	YAHIMA LAGO, President
Signatur	e of an officer or director Printed or typed name and title
I further agree to of my duties, and document is being corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address. I hereby confirm that the been notified in writing of this change. Date Date Date Date
Hugo	L. Gaicia
J Ty	rped or Printed Name

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