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(Re	questor's Name)				
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PICK-UP	☐ WAIT	MAiL			
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Certified Copies	_ Certificates of	Status			
Special Instructions to	Filing Officer:				
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SECRETARY OF SIAIDA TALLAHASSEE FLORIDA 15 JAN 26 PH 2: 27

FEB 02 2015 T. CARTER

COVER LETTER

Divisio	n of Corporations	•					
SUBJECT:	Sierra Ridg	ge Property Oy	vners' A	ssociation,	, Inc.		
		Name of	Corporatio	n			
DOCUMENT NUMBER:		N02299	102299				
The enclosed S	tatement of Chang	ge of Registered Off	ice/Agent a	and fee are sub-	nitted for filing.		
Please return al	l correspondence	concerning this matt	er to the fo	llowing:			
		DANIEL W	ASSERS	TEIN			
	•	Name of C	ontact Pers	ion			
	WASSERSTEIN, P.A.						
Firm/Company							
6501 CONGRESS AVENUE, SUITE 100 Address							
		AC	idress				
		BOCA RATO	ON. FL 33	36487			
City/State and Zip Code							
	danw@wassersteinpa.com						
E-mail address: (to be used for future annual report notification)							
Far frombar info		41-10	. aalli				
roi turuiei into	mation concerni	ng this matter, please	can:				
	ANIEL WASSE Name of Contact		at (561	288-3999 ytime Telephone Number		
	Name of Comac	FERSON	Ai	ea Code & Day	ytime relephone Number		
Enclosed is a \$3	35.00 check made	payable to the Depa	artment of S	State.			
	Mailing	Address: nent Section		Street Addres	<u>88:</u>		
		nent Section of Corporations		Amendment	Section Corporations		
	P.O. Bo			Clifton Build			
		ssee, FL 32314			tive Center Circle		

2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: Sierra Ridge Property Owners' Association, Inc. 2. The principal office address: 21300 NE 10th Avenue, Miami, FL 33179 3. The mailing address (if different): N/A/ 3/30/1984 N02299 4. Date of incorporation/qualification: ___ Document number: 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) RAPHAEL, LINDSAY ESQ., TRIPP SCOTT, P.A. 110 SE 6TH STREET, 15TH FLOOR FORT LAUDERDALE, FL 33301 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): WASSERSTEIN, P.A. 6501 CONGRESS AVENUE, SUITE 100 PO Box NOT acceptable BOCA RATON, FL 33487 The street address of its registered office and the street address of the business office of its registered agent; as changed will be identical. Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has few notified in writing of this change. If signing on behalf of an entity: DANIEL WASSERSTEIN

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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

Typed or Printed Name