

NO30000009880

(Requestor's Name)

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(Business Entity Name)

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TALLAHASSEE FLORIDA

POOR
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Talavera Association, Inc.

Name of Corporation

DOCUMENT NUMBER: N03000009880

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:

Laura M. Manning-Hudson, Esq.

Name of Contact Person

Siegfried Rivera Lerner De La Torre & Sobel, P.A.

Firm/Company

1675 Palm Beach Lakes Boulevard, Suite 500

Address

West Palm Beach, Florida 33401

City/State and Zip Code

lmanning@siegfriedlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laura M. Manning-Hudson, Esq. at 561 296-5444

Name of Contact Person

Area Code & Daytime Telephone Number

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Talavera Association, Inc.
2. The principal office address: 2801 North University Drive, Suite 204, Coral Springs,
Florida 33065
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/13/2003 Document number: N03000009880

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)

Backer Law Firm, P.A.

400 South Dixie Highway, Suite 420

Boca Raton, Florida 33432

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SKRLD, INC.

201 Alhambra Circle, # 1102

P.O. Box NOT acceptable

Coral Gables, Florida 33134

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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.




Signature of an officer or director

Sean Galt, President

Printed or typed name and title

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 been notified in writing of this change.



Signature of Registered Agent

7/30/12

Date

If signing on behalf of an entity:

Helio De La Torre

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314