N04000000464

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COVER LETTER

Division of Corporations SUBJECT: THE PALMS AT BAYSHORE HOMEOWNERS' ASSC Name of Corporation N04000000464 DOCUMENT NUMBER:_ 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: Russell M. Robbins, Esq. Name of Contact Person Mirza Basulto & Robbins, LLP Firm/Company 14160 Palmetto Frontage Road, Suite 22 Address Miami Lakes, Florida 33016 City/State and Zip Code rrobbins@mbrlawyers.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Russell M. Robbins, Esq. 510-1000 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations **Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section

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

-			107.1508, or 617.1508, F I under the laws of the St		his	
			l agent, or both, in the St			
	•		YSHORE HOME	OWNERS	ASSOCIATION	Inc.
	office address: C/O M		MENT, INC.			
	142 Avenue, Mian					
3. The mailing a	ddress (if different):					
4. Date of incorp	oration/qualification: _	01/14/2004	Document number:	N04000	000464	
	street address of the cu tment of State: (If resig		at and registered office on	n file with the		
	Paige Law Group	P.A.				
	9500 South Dade	and Boulevard,	Suite 550		SEC.	
	Miami, FL 33156				JUI 25	
6. The name ark (if changed):	l street address of the no	ew registered agent (if changed) and /or regist	tered office	3 198	
	Mirza Basulto & F	Robbins, LLP	, T		2: 5 5 88	
	14160 Palmetto F	rontage Road, S				
	Miami Lakes, Flor	ida 33016				
The street addr	ess of its registered off	ice and the street ad	ldress of the business of	fice of its regist	ered agent,	
		ition duly adopted bation has been notif	by its board of directors fied in writing of the cha	or by an officer ange.	·so	
	ing Lopez ire of an other or difector	+ d - st - s - s - s - s - s - s - s - s -	Printed or typed	ez, President		
I hereby accept I further agree of my duties, a document is be corporation ha	the appointment as re to comply with the pro- nd I am familian with a ring filed merely to refl is been notified in write	gistered agent and visions of all statut nd accept the oblig ect a change in the ng of this change.	agree to act in this capa es relative to the proper ation of my position as I registered office addres.	acity cand complete pregistered agen s, I hereby conf	verformance t. Or, if this irm that the	
1			tu 11 5			
/	gnature of Registered Agent		Date	e		
\	chalf of an entity:					
	M. Robbins, Esq., f Typed or Printed Name	Partner			,	
	\	* * * FILING FEE	E: \$35.00 * * *			
M CR2E045 (8/05)	MAKE CHECKS SAIL TO: DIVISION OF C	S PAYABLE TO FLOR CORPORATIONS, P.C	RIDA DEPARTMENT OF S D. BOX 6327, TALLAHAS	TATE SSEE, FL 32314		