## N0400002275

(Re	equestor's Name)	
(Ad	dress)	
(Ád	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number;	
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
	VENTURA AT MALIBU BAY NEIGHBORHOOD ASSOCIATION, INC.
SUBJI	Name of Corporation
	·
DOCL	MENT NUMBER: N0400002275
	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	MARILYN CABALLERO-RIOS
	Name of Contact Person
	M & E ASSOCIATES OF MIAMI, INC.
	Firm/Company
	13055 SW 42 Street, Suite 203, Miami, FL 33175
	Address
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
D	ALE C. GLASSFORD, ESQ. at (305 259.8155  Name of Contact Person Area Code & Daytime Telephone Number
	Name of Contact Person Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section  Street Address: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

## 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 Floridain order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Ventura at Malibu Bay Neighborhood Association, Inc. 2. The principal office address: 13055 SW 42 Street, Suite 203, Miami, FL 33175
M & E Associates, 13055 SW 42 St, Suuite 203  3. The mailing address (if different):  Miami, FL 33175
4. Date of incorporation/qualification: 3/4/04 Document number: N0400002275
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)  SKRLD, INC. 201 Alhambra Circle, Suite 1102
Coral Gables, FL 33134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  DALE C. GLASSFORD, ESQ.  12928 SW 133 Court, Miami, FL 33186  P.O Box NOT acceptable
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.  An uetter of profile or firector  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.  12/3/09  Date  Date  If signing on behalf of an entity:
Typed or Printed Name

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