## N04000004700

(Re	questor's Name)	
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<u>:</u> (Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	<u> </u>
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Certified Copies	_ Certificates	s of Status
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KARO Chy

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: Marbella Bay Homeowner's	Association, Inc.					
DOCUMENT NUMBER:						
	want and fac are submitted for filling					
The enclosed Statement of Change of Registered Office/A	-					
Please return all correspondence concerning this matter to	the following:					
lanaifor Ann O						
Name of Conta	Jennifer Ann Coya, Esq. Name of Contact Person					
Joseph H. Ganguzza &	Associates. P.A.					
Firm/Company						
1360 S. Dixie High	way, suite 100					
Addres						
Coral Gables, FL 33146						
City/State and 2	Zip Code					
Jennifer@jhglaw	wers com					
E-mail address: (to be used for future	re annual report notification)					
· ·	•					
For further information concerning this matter, please call	:					
	005					
Jennifer Ann Coya, Esq.	at ( 305 ) 662-9908 Area Code & Daytime Telephone Number					
	Their code at Daytime Pelephone Rumber					
Enclosed is a \$35.00 check made payable to the Departme	ent of State.					
Mailing Address:	Street Address:					
Amendment Section	Amendment Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327	Clifton Building					
Tallahassee, FL 32314	2661 Executive Center Circle					
	Tallahassee, FL 32301					

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

statement of ch	ange is submitted for a co	orporation organized	107.1508, or 617.1508, Flo I under the laws of the State I count on both in the State	e of	
-	the corporation: Marbo	**	l agent, or both, in the State	e of Fioriaa <sub>.</sub>	
2. The maine of	office address: 11981	SW 144th Court	Suite 201	<del></del>	
Miami, FL	00.00				
4. Date of incor	poration/qualification:	05/11/2004	Document number:	N04000004700	
5. The name an		rrent registered agen	at and registered office on fi		
	SKRLD, INC.				
	201 Alhambra Circle, Suite 1102				
	Coral Gables, FL	33134			
6. The name an (if changed):		w registered agent (i	f changed) and /or registere		
	Joseph H. Gangu	zza & Associates	s, P.A.		
	1360 S. Dixie High	nway, Suite 100	Sentable	——	
	Coral Gables, FL		·		
The street addi	ress of its registered offi Il be identical.	ce and the street ad	dress of the business office	e of its registered agent,	
Such change wanthorized by	vas authorized by resolu the board, or the corpora	tion duly adopted bation has been notifi	y its board of directors or led in writing of the chang	by an officer so e.	
Signal	ure of an officer or director		ALTONS CARC	Cand title	
oj my auties, a document is be	t the appointment as reg to comply with the prov nd I am familiar with a eing filed merely to refle as been notified in writir	ra accept the obliga ect a change in the r	igree to act in this capacit s relative to the proper an ation of my position as regi egistered office address, I	y. d complete performance istered agent. Or, if this hereby confirm that the	
D'z	WIC_		10-	30-07	
Si	gnature of Registered Agent	-	Date		
taul	ehalf of an entity:  A Mc Ken Typed or Printed Name	ing.			

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

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