## ND4000004858

| (Re                     | questor's Name)   |             |
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| (Ad                     | dress)            |             |
| (Cit                    | y/State/Zip/Phon  | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nai | me)         |
| (Do                     | cument Number)    | )           |
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SECRETARY OF STATE
AND ANASSEE FLORIDA

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## **COVER LETTER**

Amendment Section Division of Corporations SUBJECT: Coral Springs Estate Townhomes II Condo Assoc, Inc. Name of Corporation N04000004858 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. 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 P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

1 ,500

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

| •                             | provisions of sections 60%<br>age is submitted for a con  |   |                                    |   |  | _                   |
|-------------------------------|---|---|------------------------------------|---|--|---------------------|
|                               | to change its registered  |   |                                    |   |  | G <sub>6</sub>      |
|                               | ne corporation: Coral   |   |                                    |   |  | Inc.                |
| 2. The principal of           | office address: 10331 f   | NW 33RD STR   | EET CORAL SI                       | PRINGS  | FL 33075   |                     |
| 3. The mailing ac             | Idress (if different): PC   | BOX 8581 CC   | RAL SPRINGS                        | S FL 330  | )75  |                     |
| 4. Date of incorp             | oration/qualification:  | 05/13/2004  | Document numb                      | oer:  | N0400000485  | 58                  |
|                               | street address of the curr<br>ment of State: (If resigno  |   | t and registered off               | ice on file   | with the   |                     |
|                               | REILLY, SHARON  | _ ·= · · · ·  |                                    |   | ت<br>ت غر —  |                     |
|                               | 10331 NW 33RD S   | TREET   | ·                                  |   | 文 香  | THE STATE OF        |
|                               | CORAL SPRINGS   | FL 33075  |                                    |   | _ F. 68  | AL SOL              |
| 6. The name and (if changed): | street address of the new   | registered agent (i   | fehanged) and /or                  | registered  | office CAC   | 34 12: F            |
|                               | Mirza Basulto & Ro  | bbins, LLP  |                                    |   |  | , <b>O</b>          |
|                               | 14160 Palmetto Fro  |   |                                    |   | <u> </u>   |                     |
|                               | Miami Lakes, Florid   | P.O. Box NOT ac<br>a 33016  | ceptable                           |   |  |                     |
| •                             | ss of its registered office<br>be identical.  |   | lress of the busine                | ss office o   | of its registered age  | ent,                |
|                               | s authorized by resolution board or the corporation   |   |                                    |   |  |                     |
| Sugarture                     | d an officer of director  | <u></u>   | Setcio Gorni                       | typed name a  | esidact.   |                     |
|                               | in appointment as regit<br>o domply withthe provis<br>I kan familiar with and<br>golied merely to reflect<br>been natified in writing | stered agent and a<br>sions of all statute,<br>accept the obliga<br>a change in the ro<br>of this change. |                                    | capacity.<br>oper and o<br>as regist<br>dress, I he | complete perform<br>ered agent. Or, if<br>ereby confirm that | ince<br>this<br>the |
| - Sign                        | attire of Registered Agent  |   |                                    | Date  |  |                     |
| If signing on beh             | nalf of an entity:  |   |                                    |   |  |                     |
|                               | Robbins, Esq., Par  | tner  |                                    |   |  |                     |
| X \ \ \ \                     |   | * FILING FEE:   | \$35.00 * * *                      |   |  |                     |
| , My                          | MAKE CHECKS PA<br>IL TO: DIVISION OF COR  |   | DA DEPARTMENT (<br>BOX 6327, TALLA |   | FL 32314   |                     |

CR2E045 (8/05)