

NO500000050

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

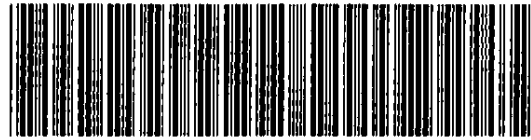
(Business Entry Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200187483092

11/08/10--01031--001 \$35.00

ADP STATE
NOV 22 4:19:25
SECRETARY OF STATE
11101
11/22/10

Barro/Heiko

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mirador 1000 Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N05000000050

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:

Sheebra Brannon
Name of Contact Person

Mirador 1000 Condominium Association, Inc.
Firm/Company

1000 West Avenue
Address

Miami Beach, FL 33139
City/State and Zip Code

admin@mirador1000.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sheebra Brannon at (305) 672-8353
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

10 NOV 22 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 10, 2010

SHEEBRA BRANNON
1000 WEST AVE
MIAMI BEACH, FL 33139

SUBJECT: MIRADOR 1000 CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N05000000050

We have received your document for MIRADOR 1000 CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 910A00026552

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

1. The name of the corporation: Mirador 1000 Condominium Association, Inc.

2. The principal office address: 1000 West Avenue, Miami Beach, FL 33139

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 01/03/2005 Document number: N05000000050

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)

Brough, Chadrow & Levine, P.A.

1900 N. Commerce Pkwy

Weston, FL 33326

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

Alan Shugarman

1000 West Avenue

P.O. Box NOT acceptable

Miami Beach, FL 33139

19 NOV 22 09:10:23
APPROVED
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

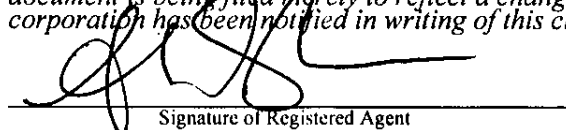
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Erica Dunmore Vice 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

11.18.10
Date

If signing on behalf of an entity:

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