

105000000977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

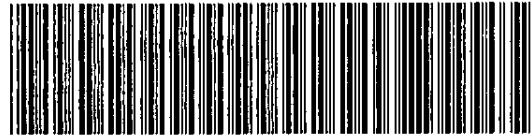
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 JAN 26 PM 3:45

APPROVED

RAJO
1/27/11
TL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WAVERLY AT LAS OLAS CONDOMINIUM ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: NO500000977

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:

Tara G. Gartner, CAM
Name of Contact Person

The Continental Group, Inc. on behalf of
The Waverly at Las Olas Condominium Assoc, Inc
Firm/Company

110 N. Federal Highway 5th Floor Management Offc.
Address

Ft Lauderdale, FL 33301
City/State and Zip Code

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

For further information concerning this matter, please call:

Tara G. Gartner, CAM at 954, 358 2555
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

CR2E045 (8/05)

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: The Waverly at Las Olas Condominium Assoc, Inc
- 2. The principal office address: 110 N. Federal Hwy 5th FL
Ft Lauderdale, FL 33301
- 3. The mailing address (if different): _____

4. Date of incorporation/qualification: 01/31/2005 Document number: N05000000977

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)

SKRL, Inc.
201 ALTAMBRA CIRCLE STE 1102
CORAL GABLES, FL 33134

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

Jane Bolin
Peyton Bolin, PL
4792 W. Commercial Blvd
P.O. Box NOT acceptable
Ft Lauderdale, FL 33319

11 JAN 26 PM 3:45

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.

John G. Janho
Signature of an officer or director John G. Janho
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]
Signature of Registered Agent 1/3/11
Date

If signing on behalf of an entity:

JANE BOLIN / PEYTON BOLIN, PL
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

CR2E045 (8/05)

Paid By Check Number: 51021 - Paid Amount: \$35.00