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## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 18, 2006

VILLAMORE CONDOMINIUM ASSOCIATION, INC. 6011 WEST 24TH AVE HIALEAH, FL 33016

SUBJECT: VILLAMORE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N05000001628

We have received your document for VILLAMORE 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):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The document is illegible and not acceptable for imaging.

PLEASE TYPE OR PRINT CLEARLY.

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) 245-6964.

Letter Number: 106A00045853

Irene Albritton Document Specialist



August 9, 2006

VILLAMORE CONDOMINIUM ASSOCIATION, INC. 7900 NW 155 ST., STE. 205 2nd mailing MIAMI LAKES, FL 33016

SUBJECT: VILLAMORE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N05000001628

We have received your document for VILLAMORE 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):

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If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Document Specialist

Letter Number: 106A00045853

## STATEMENT OF CHANGE OF REG. STERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.  ASSOCIATION, INC.
1. The name of the corporation: Vallamble Oxilomedium
2. The principal office address: 6011 West & 4 Own Ruslend 43
3. The mailing address (if different): 90 ARS My + 7900 NU 155  Ste 205 Miani Sokes 4/230
4. Date of incorporation/qualification: 2/16/05 Document number: 2050000 1628
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Baretsky Louis
555 NE 15, 57. She 100
- Mani 4/ 33/32
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Carried Brain Stellin
4000 Nollywood Blid She 265 DO
Mallywood 4 3300/
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 to be by its board of directors or by an officer so authorized by the board or the orporation has the board in writing of the change.
Maria Paredes Vice President  (Signature of an Officer of director)  Maria Paredes Vice President  (Printed or typec name and true)
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.
De Signature of Registered Agent)  (Signature of Registered Agent)  (Date)
(Signature of Registored Agent)  If signing on behalf of an entity:
Eistinger Brown, Lewis & Frankel, PA
* * * 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)