

NO5000001847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

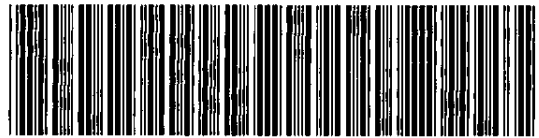
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/08/10--01042--014 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 FEB 15 PM 3:58

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[Handwritten signature]
PA Chang

2-24-10



Check Requisition Form

Date: 08/17/09

Bank Account:

Capital Contribution ☐
Operating ☒
Other ☐

Community: VISTA TRACE 4 Condominium Association, Inc.

Payable to: Florida Dept. of State

DIVISION of CORPORATIONS

Address:

P.O. Box 6327

Tallahassee, FL 32314

Phone:

850-245-6056

Amount:

\$ 35.00

Requested By:

[Signature]

Purpose:

Change Mailing Address

Budget:

G/L Code	Invoice Date	Invoice#	Description	Amount
50053				

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: WETA TRACE 4 Condominium Association
2. The principal office address: 910 The Continental Group, INC
11981 SW 144 Ct. Suite 201, MIAMI, FL 33186
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/22/2005 Document number: N05 000001847

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CARLOS A. TRIAY
2301 NW 87 Ave. #501
DORAL, FL 33172

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

Association Law Group, P.L.
1666 Kennedy Causeway, #305
(P.O. Box NOT acceptable)
North Bay Village, FL 33141

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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]
(Signature of an officer or director)

(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.

David C Arnold
(Signature of Registered Agent)

11/02/09
(Date)

If signing on behalf of an entity:

DAVID C ARNOLD, manager
(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)