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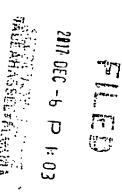
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MARIA VICTORIA ARIAS MARIAS@SRILLAW.COM

REPLY TO CORAL GABLES OFFICE

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November 29, 2017

## **VIA FEDERAL EXPRESS**

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Village at the Falls Condominium Association, Inc

("Association")

To Whom it May Concern:

Enclosed please find an original and one (1) copy of the Statement of Change of Registered Office or Registered Agent for the above referenced Association, together with our check in the amount of \$35.00 to cover the fee for filing same. Please date stamp the copy and return same to the undersigned in the enclosed self-addressed stamped envelope.

Should you have any questions, please do not hesitate to contact our office.

Sincerely,

SIEGFRIED, RIVERA, HYMAN, LERNER,

YE LA TORRE, MARS & SOBEL, P

Maria Victoria Arias

MVA/bly Enclosures

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201 Alhambra Circle Eleventh Floor Coral Gables, Florida 33134 Miami-Dade: 305.442.3334 Fax: 305.443.3292 Toll Free: 800.737.1390

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida . ange is submitted for a corporation organized under the laws of the State of _ er to change its registered office or registered agent, or both, in the State of I		<del></del>	
1. The name of	the corporation: Village at the Falls Condominium Association	on, Ind	<u> </u>	
2. The principal	l office address: 13100 S.W. 92nd Avenue, Clubhouse			
	Miami, FL 33157			
3. The mailing a	address (if different): 9000 S.W. 152nd Street, Suite 102			
	Palmetto Bay, FL 33157			
4. Date of incor	rporation/qualification: 7/31/2009 Document number: N0500	00002	.075	
5. The name and	d street address of the current registered agent and registered office on file wartment of State: (If resigned, enter resigned)	ith the		
	Carlos F. Martin, P.A.			
	2525 Ponce de Leon Blvd., Suite 300			
	Coral Gables, FL 33134	201		
6. The name and street address of the new registered agent (if changed) and /or registered officer (if changed):				
	SKRLD, Inc.	o-	iT:	
	201 Alhambra Circle, 11th Floor	0	TP	
	P.O. Hox NOT acceptable Coral Gables, FL 33134	# 03		
The street address changed will	ress of its registered office and the street address of the business office of it	s regist	ered agent,	
Such change we authorized by the	as authorized by resolution duly adopted by its board of directors or by an the board or the corporation has been notified in writing of the change.	officer	so .	
Signatu I haraba ayaba	Thinks of types halle the		W: RECTOR	
I herety accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comf my duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered office that the corporation has been notified in writing of this change.	iplete i as reg se addre	istered ess, I	
by: 1/2	42 11/28/17	<u>.</u>		
If signing on be	ehalf of an entity:			
LINICI	Speci or Printed Name			

\* \* \* FILING FEE: \$35.00 \* \* \*