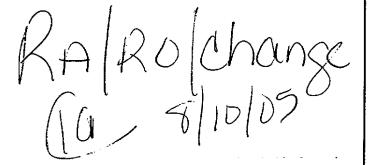
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| (Re | equestor's Name) | |
|---|-------------------|-------------|
| (Ád | ldress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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NATALIE A. BRUZZESE
MAY HUSTEY

August 3, 2005

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Sailboat Pointe Condominium Association, Inc. Change of Registered Agent

Dear Sir / Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations which has been properly filled out by this office. Furthermore, enclosed please find a check made payable to the Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed below.

Sincerely,

KATZMAN & KORR, P.A.

Fewen L. Korr, Esq. Managing Partner

FLK:vt Enclosure

cc: Property Manager

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 o | f 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: Sailboat Pointe Condominium Association, Inc. |
| 2. The principal | office address: 2325 NW 3312 Street |
| | Fort landerdale, P. 33309. |
| 3. The mailing a | address (if different): 145 Sawysass (peparate flar Kwang |
| | Suverse, FC. 33323. |
| 4. Date of incor | poration/qualification: 04/22/2005 Document number: N05000004202 |
| | d street address of the current registered agent and registered office on file with the rtment of State: |
| | Ana V. De Villiers |
| | 201 Alhambra Circle, Suite 601 |
| | Coral Gables, Florida 33134 |
| 6. The name an changed): | nd street address of the new registered agent (if changed) and /or registered of if |
| | Katzman & Korr, P.A. |
| | 1501 Northwest 49th Street, Suite 202 |
| | (P.O. Box or personal malibox NOT acceptable) |
| | Fort Lauderdale, Florida 33309 |
| agent, as chang | ess of its registered office and the street address of the business office of its registered ed will be identical. |
| Such change was authorized by the | as authorized by resolution duly adopted by its board of directors or by an officer so be done of the corporation has been notified in writing of the change. |
| (Signature of an Olice | chairman or vice chairman of the board) To Ame De Greso, Holent (Printed or typed name and title) |
| registe | 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 complete f my duties, and I am familiar with and accept the obligation of my position as y. Or, if this document is being filed merely to reflect a change in the registered hereby confirm that the corporation has been notified in writing of this change. |
| | Signature of Registered Agent) (Date) |
| If signing on beha | If of an entity: L. KOCC ESS. Kotzman & KoC, P.A. Typed or Printed Name) (Capacity) |

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