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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SANTA MONICA TOWNHOMES I	HOMEOWNERS AS
DOCUMENT NUMBER: NO50000	04307
The enclosed Statement of Change of Registered Office/Agent	t and fee are submitted for filing.
Please return all correspondence concerning this matter to the	following:
STEVEN S. VALA	ANCY
Name of Contact Pe	erson
STEVEN S. VALANO	CY, P.A.
Firm/Company	
311 SE 13TH STF Address	REET
FORT LAUDERDALE, FLO	ORIDA 33316
City/State and Zip C	Code
managementusa@hoti	mail.com
E-mail address: (to be used for future a	nnual report notification)
For further information concerning this matter, please call:	
DONNA AVEN at (954 463-1600 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of	f State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

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

1 , ~~

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of FLORIDA in the control of the State of Florida.
	office address: 8204 SANTA MONICA AVENUE, TAMARAC, FLORIDA 33321
	ddress (if different):_c/o USA SERVICES, FT STREET, HOLLYWOOD, FLORIDA 33024
	poration/qualification: 4/26/2005 Document number: NO500004307
	I street address of the current registered agent and registered office on file with the trment of State: (If resigned, enter resigned)
	STRALEY & OTTO, PA
	2699 STIRLING ROAD SUITE C-207
	FORT LAUDERDALE, FL 33312
6. The name and (if changed):	STEVEN S. VALANCY, P.A. 311 SE 13TH STREET P.O. Box NOT acceptable FORT LAUDERDALE, FLORIDA, 33316
	STEVEN S. VALANCY, P.A.
	311 SE 13TH STREET
	P.O. Box NOT acceptable
	TORT EAGLER TECHNOLOGIC
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
- Signatur	Printed or typed name and title
I hereby accept I further agree to of my duties, an document is bei corporation has	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 performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
	MARCH 7, 2012
•	half of an entity:
	half of an entity:
	yped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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