## N05000005279

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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Lisa A. Magill
Shareholder
Phone: (954) 965-5053 Fax: (954) 985-4176
Imagill@bplegal.com

1 East Broward Blvd., Suite 1800 Ft. Lauderdale, Florida 33301

April 17, 2015

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

5275 95th Street N. Condominium Association, Inc.

Document No. N05000005279

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office/Agent form along with Check #1469 in the amount of \$35.00 made payable to the Florida Department of State to cover the cost of filing.

Should you have any questions, please do not hesitate to contact me. Thank you.

Very truly yours,

For the Firm

LAW/tw Enclosure

ACTIVE: 6971632\_I

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

Pursuant to the provision statement of change is su in order to change	bmitted for a c	orporation organized	under the laws of the .	State of Florida		
1. The name of the corpor		-		-		
2. The principal office ad	•					
3. The mailing address (if						
4. Date of incorporation/o	qualification: _	05/20/2005	_ Document number: _	N05000005279		
5. The name and street ad Florida Department of			and registered office of	on file with the		
		Gaylor, Thomas W.				
		2828 Paddock Drive	2			
			4684			
6. The name and street ad (if changed):	ldress of the ne	ew registered agent (if	changed) and /or regis	stered office		1901STA10
		Becker & Poliakoff	, P.A.		24	
One East Broward Blvd., Suite 1800 P.O. Box NOT acceptable						
	Ft. Lauderdale, FL 3301					
The street address of its as changed will be identi	registered offical.	ce and the street addr	ess of the business of	fice of its registe	red agen	it,
Such change was authorized by the board,	zed by resolut	ion duly adopted by i	ts board of directors of	or by an officer s	o	
	100		Frinced or types of		\ /* ·	LNAM C
I haveby accept the appo I further agree to comply performance of my dutie agent. Or, if this docum hereby confirm that they		istered agent and agi isions of all statutes i niliar with and accep ed merely to reflect a is been notified in wr	ree to act in this caparelative to the proper the obligation of my change in the registe iting of this change.	city. and complete position as regis red office addres	stered is, I	
Signature of Re.  If signing on behalf of ar	n entity:	_	Date			