## N05000005402

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## **COVER LETTER**

TO:	Amendmen Division of	nt Section f Corporations			
SUBJ	ECT:	Arbor Lakes Co	ondominium A Name of Corpora		D
DOCU	J <b>MENT NU</b>	MBER:	N050000	05402	
The en	closed State	ment of Change of Reg	istered Office/Ager	nt and fee are submi	tted for filing.
Please	return all co	rrespondence concerni	ng this matter to the	following:	
		-			
			Bridgette Bonet,	Esq.	•
			Bridgette Bonet, Name of Contact P	erson	
					•
		Ass	ociation Law Gr	oup. P.L.	
			Firm/Company		
		1666 Ke	ennedy Causewa	av. Suite 305	
	1666 Kennedy Causeway, Suite 305 Address				
		North	Bay Village Flo	rida 33141	
÷	North Bay Village, Florida 33141 City/State and Zip Code				
		E mail address, (4a le	bbonet@algpl.c	om	<del>~~~~</del>
		E-mail address: (to b	e used for future a	innuai report notii	neation)
			•		
For fur	ther informa	tion concerning this ma	atter, please call:		
į		Bridgette Bonet		305 )	038 6033
		ne of Contact Person	at (_	Area Code & Dayti	938-6922 me Telephone Number
				·	•
Enclos	ed is a \$35.0	0 check made payable	to the Department o	f State.	
	r				
		Mailing Address:		Street Address:	
		Amendment Sec	tion	Amendment Se	
		Division of Corp	oorations	Division of Co	-
		P.O. Box 6327	22214	Clifton Buildin	
		Tallahassee, FL	32314	Tallahassee, F.	e Center Circle
				i alialiassee, F.	L J4JUI

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

statement of cha	te provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta hange is submitted for a corporation organized under the laws of the State of <mark>Flo</mark> der to change its registered office or registered agent, or both, in the State of Flor	orida			
	f the corporation: Arbor Lakes Condominium Association, Inc	s			
2. The principal	al office address: 100 Arbor Lakes Circle, Sanford, FL 32771				
	g address (if different): 3600 S. Congress Avenue, Suite K n Beach, Florida 33426				
4. Date of incorp	orporation/qualification: 05/24/2005 Document number: N05	5000005402			
	nd street address of the current registered agent and registered office on file with teartment of State: (If resigned, enter resigned)	the			
	Apogee Association Services				
	3600 S. Congress Avenue, Suite K				
	Boynton Beach, Florida 33426				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Association Law Group, P.L.					
,	Association Law Group, P.L.	P-6			
	1666 Kennedy Causeway, Suite 305	ORPO			
	P.O. Box NOT acceptable  North Bay Village, FL 33141	PH 4: 30			
<b>771</b>		o, 👭			
The street address as changed will	ress of its registered office and the street address of the business office of its rell be identical.	egistered agent,			
Such change was authorized by	was authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change.	ficer so			
Signatur	Rum Tray Reunes UCE Printed or typed name and title	PRESIDENT			
I further agree i of my duties, an document is bei	ot the appointment as registered agent and agree to act in this capacity. The to comply with the provisions of all statutes relative to the proper and comploind I am familiar with and accept the obligation of my position as registered a Leing filed merely to reflect a change in the registered office address, I hereby to The associated in writing of this change.	ete performance igent. Or, if this confirm that the			
_ About	at August 25, 2011				
	ignature of Registered Agent Date				
Bridge He	Dehalf of an entity:  HE E BOWL +  Typed or Printed Name				
() '	A Printed Tallie				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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