N0500000627

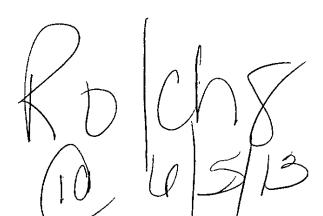
(Re	equestor's Name)				
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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COVER LETTER

TO:	Amendmen Division of	t Section Corporations				
SUBJ	ect: <u>V</u> i	llas of Palomino	Condominium Name of Corporati	Association, Inc.		
DOC	UMENT NU	MBER:	N0500000	06527		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please	return all con	respondence concerni	ng this matter to the	following:		
	_		Daniel Wassers			
			Name of Contact Pe	rson		
			Wasserstein, P	Δ		
			Firm/Company			
		6501 (Congress Avenue	, Suite 100		
			Address			
		<u> </u>	Boca Raton, FL 3 City/State and Zip C	3487 Code		
			Only of the Life C			
		dar	w@wassersteinp	a.com		
		E-mail address: (to	be used for future a	nnual report notification)		
For fu	rther informa	tion concerning this m	atter, please call:			
	Da	aniel Wasserstein	at (5701, 244-2499		
	Nan	ne of Contact Person	ur (Area Code & Daytime Telephone Number		
Enclos	sed is a \$35.0	0 check made payable	to the Department of	State.		
		Mailing Address Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sange 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 F	Florida
1. The name of t	the corporation: Villas of Palomino Condominium Associa	tion, Inc.
	office address: c/o Th Continental Group, Inc., 2950 N. 28th Ter	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 06/23/2005 Document number: N	105000006527
	d street address of the current registered agent and registered office on file wi rtment of State: (If resigned, enter resigned)	th the
	WASSERSTEIN, P.A	_
	7795 NW BEACON SQUARE BLVD.,SUITE 201	_
	Boca Raton, FL 33487	<u> </u>
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered off	13 JUN -3
	WASSERSTEIN, P.A	
	6501 Congress Avenue, Suite 100	
	P.O. Box NOT acceptable	- 212
	Boca Raton, FL 33487	_ '
The street addre	ess of its registered office and the street address of the business office of it be identical.	ts registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.	officer so
Signatur	are of an officer or director Printed or typed name and t	itle
I hereby accept I further agree a of my duties, an document is bei corporation has	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 cond I am familiar with and accept the obligation of my position as registere ing filed merely to reflect a change in the registered office address, I here is been notified in writing of this change.	
_ Law	gnature of Registered Agent Tarte	
If signing on be	ehalf of an entity:	
Darrel	Typed or Printed Name	

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