

NO5000009143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

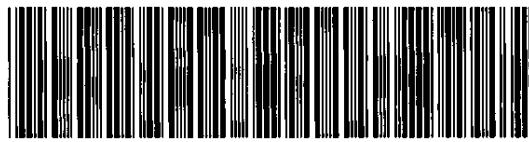
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

6/18/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MIRABELLA I CONDOMINIUM ASSN. INC.
Name of Corporation

DOCUMENT NUMBER: NO500009143

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TAYLOR iCARLS P. A.

Name of Contact Person

TAYLOR iCARLS P. A.

Firm/Company

150 N. WESTMONTE DR.

Address

ALTAMONTE SPRINGS, FL 32714

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

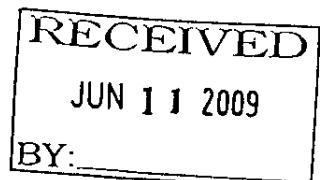
TAYLOR iCARLS P.A.
Name of Contact Person

at (407) 660-1040
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of 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.

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

TAYLOR & CARUS Q.A.

150 N. WESTMONT DR.

P.O. Box NOT acceptable

P.O. Box 1034 acceptable
ALTAMONTE SPRINGS, FL 32714

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

B. S. Bal
Signature of the Minister or director

Barry Big Dan - PROPERTY MARKER

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

John Saylor
Signature of Registered Agent

6/12/09

Date

If signing on behalf of an entity:

Robert L. Taylor
Typed or Printed Name

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

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