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COVER LETTER

TO: Amendment Section Division of Corporations
ENCLAVE AT DORAL CLUB CONDOMINIUM ASSOCIATION, INC. SUBJECT: Name of Corporation
POCUMENT NUMBER: N0500009507
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:
Sylvia Glist
The Enclave at Doral
4300 N.W. 107th Avenue
Doral, Florida 33178
City/State and Zip Code
mgratenclave@bellsouth.net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sylvia Glist Name of Contact Person
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

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 or to change its registered office or registered agent, or both, in the State of Florida.
1 The name of	the corporation: ENCLAVE AT DORAL CLUB CONDOMINIUM ASSOCIATION, INC.
2. The principal	office address: 4300 NW 107TH AVENUE, MIAMI FL 33178
3. The mailing a	address (if different): C/O THE CONTINENTAL GROUP, INC.,
	BLUE LAGOON DRIVE #310, MIAMI FL 33126
4. Date of incorp	poration/qualification: 09/14/2005 Document number: N0500009507
5. The name and	I street address of the current registered agent and registered office on file with the truent of State: (If resigned, enter resigned)
•	ASSOCIATION LAW GROUP, P.L.
	1666 KENNEDY CAUSEWAY, SUITE 305
	NORTH BAY VILLAGE FL 33141 US
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office the street address of the new registered agent (if changed) and /or registered office the street address of the new registered agent (if changed) and /or registered office the street address of the new registered agent (if changed) and /or registered office the street address of the new registered agent (if changed) and /or registered office the street address of the new registered agent (if changed) and /or registered office the street address of the new registered agent (if changed) and /or registered office the street address of the street addre
	The Walton Law Firm, P.A. dba Walton Jones + Browne
	1999 SW 27th Avenue, Miami, FL 33145
	P.O. Box NOT acceptable
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatu	EDUARDO ROQUE V.P/Se C
i turthor doroo l	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 my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Stor	Mature of Registered Agent Date
If signing on bel	half of an entity:
Carla	Tones uped or Printed Name

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

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

CR2E045 (03/12)