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Director of Finance INDRANI S. PARSAUD, CPA

Director of Operations CORBYN A. GRILCO

Director of Client Services MONICA VILLEZ

Firm Administrator

November 12, 2008

Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

> Re: Polo Glen Condominium Association, Inc. Change of Registered Agent

Dear Sir / Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations which has been properly filled out by this office. Furthermore, enclosed please find a check made payable to the Department of State in the amount of \$35.00. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed below.

Sincerely,

KATZMAN GARFINKEL

Donna D. Berger, Esq. Managing Partner

DDB:dts Enclosures

cc: **Board of Directors Property Manager**

PAT FID RMOSŵ condo hos/CLIENT\$ Polo Glen Condominium Association, IncUNFO ASCLETER-Div of Corp-Change of Reg Agent - 11-12-08 wpd

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

Pursuant to the	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
this statement of FLORIDA	of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State
of Florida.	
1. The name of	the corporation: POLO GLEN CONDOMINIUM ASSOCIATION, INC.
2. The principa	l office address: 7350 NW 4TH STREET, PLANTATION FL 33317
•	address (if different): 13860 BALLANTYNE CORPORATE PLACE, SUITE 130 TE NC 28277 US
4. Date of incor	poration/qualification: 10/14/2005 Document number: N05000010637
	d street address of the current registered agent and registered office on file with the artment of State: CT CORPORATION SYSTEM
	CT CORPORATION SYSTEM 1200 PINE ISLAND ROAD
	PLANTATION, FL 33324 US
6. The name and changed):	nd street address of the new registered agent (if changed) and /or registered office (ike KATZMAN GARFINKEL
	1501 NORTHWEST 49TH STREET, SUITE 202
	(P.O. Box or personal mailbox NOT acceptable)
	FORT LAUDERDALE, FLORIDA 33309
	ess of its registered office and the street address of the business office of its registered ed will be identical.
July 1	he board, or the corporation has been notified in writing of the change.
I hereby accept I further agree performance of registered ager office address,	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 of its document is being filed merely to reflect a change in the registered I hereby confirm that the corporation has been notified in writing of this change.
If signing on beha	\sim

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