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(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Fix Condonuinium No. 2 Association, Inc. (Name of Alien Business Organization)
Dear Sir or Madam:
The enclosed Statement of Change of Registered Agent/Registered Office for Alien Business Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
David L. Brough (Name of Person)
Brough, Chadrow & Levine, P.A.  (Firm/Company)
1900 N. Commerce Parkway (Address)
Weston, PL 33326 (City/State and Zip Code)
For further information concerning this matter, please call:
David L. Brough at (954) 384-0732 (Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
■\$35.00 Filing Fee

## 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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Figi Condominium No. 2 Association, Inc. 2. The principal office address: 730 NW 107th Avenue Floor  Name of the corporation: 730 NW 107th Avenue Floor  Name of the corporation: 730 NW 107th Avenue Floor  Name of the corporation: 730 NW 107th Avenue Floor
3. The mailing address (if different):
4. Date of incorporation/qualification: Document number: N0600002045
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Jeffrey R. Margolis, PA
c/o Duane Morris LLP
200 S Biscayne Blvd., Ste 3400 Huami, FL 33131
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Brough, Chadrow & Levine, P.A.  1900 North Commerce Parkway  (P.O. Box NWeston, FL 33326
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.
(Signature of an officer or director)  Mevcedes Henderson.  (Printed or typed name and title)
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 appliamiliar with and accept the obligation of my position as registered agent. Or, if this locument 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.
(Sighature of Registered Agent)
f signing on behalf of an entity:
David Brough (Typed 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 \* \* \*