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June 13, 2013

DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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

Las Brisas Del Caribe Condominium Association, Inc.

DOCUMENT NUMBER: N06000002211

Dear Sir/Madam:

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.

Lourdes E. Ferrer, Esq. Strock & Cohen, Zipper, Ferrer Law Group, P.A. 2900 Glades Circle, Suite 750 Weston, Florida 33324 Tel: (954) 659-2220

Primary email: <u>lferrer@strocklaw.com</u>

Secondary email: mestremera@strocklaw.com

For further information, please feel free to call or email me at the above telephone number or email addresses referenced above.

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

Very truly yours,

Managing Partner

LEF/me Encl. as

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 ange is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: LAS BRISAS DEL CARIBE CONDOMINIUM ASSOCIATION, INC. I office address: C/O THE CONTINENTALGROUP, INC.	
	UE LAGOON DRIVE, SUITE 310, MIAMI, FL 33126	
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 02/27/2006 Document number: N06000002211	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	HOFFMAN, LARIN & AGNETTI, P.A.	
	999 NORTH MIAMI BEACH BOULEVARD, #201	
	NORTH MIAMI BEACH, FL 33162	.*
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered agent (if changed) and /or registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are registere	
	STROCK & COHEN, ZIPPER, FERRER LAW GROUP, P.A.	**
	2900 GLADES CIRCLE, SUITE 750	:
	P.O. Box NOT acceptable WESTON, FL 33327	2.
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, l be identical.	
	as authorized by resolution duly adopted by its board of directors or by an officer so the board, of the corporation has been notified in writing of the change.	
	ARMANOS LITUAN PRESIDENT	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	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 complete f my dulies, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I hat the corporation has been notified in writing of this change. Date Date	
If signing on be	ehalf of an entity:	
	EN, ZIPPER, FERRER LAW GROUP, P.A.	
1	Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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