

COVER LETTER.

TO: Amendment Section
Division of Corporations

SUBJECT: THE MIRAGE AT SAILBOAT COVE HOMEOWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: NO6000002736

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:

ALI MARCELO
Name of Contact Person

Firm/Company

8260 NW 27 ST. # 408
Address

DORAL Florida 33122.
City/State and Zip Code

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

For further information concerning this matter, please call:

ALI MARCELO at (305) 305-1603.
Name of Contact Person 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.

1. The name of the corporation: THE MIRAGE AT SAILBOAT COVE HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: 1700 NW 143 STREET
OPA LOCKA, FL. 33054
3. The mailing address (if different): 8260 NW 27 ST. STE. 408
DORAL, Florida 33122
4. Date of incorporation/qualification: 03/10/2006 Document number: N06000002736
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

JOSE C. PEREZ-DE-CORCHO
3557 ESTEPONA AVENUE
MIAMI, Florida 33178

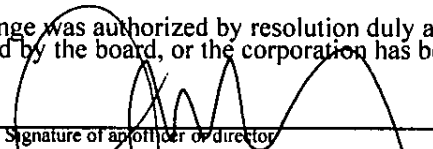
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SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

REINALDO CASTELLANOS, ESQ.
9960 BIRD ROAD
P.O. Box NOT acceptable
MIAMI, FLORIDA 33165

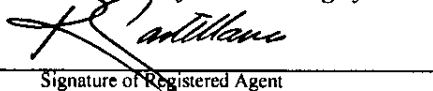
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

JOSE C. PEREZ VICE-PRESIDENT
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.


Signature of Registered Agent

06, 05 - 2009
Date

If signing on behalf of an entity:

REINALDO CASTELLANOS
Typed or Printed Name

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