## N0700003218

)	···
)	
te/Zip/Phone #)	
WAIT	MAIL
s Entity Name)	
ent Number)	
Certificates of	Status
Officer:	!
	te/Zip/Phone #)  WAIT  s Entity Name)  ent Number)  Certificates of

Office Use Only



900283793389

9002337933403 04/25/16-01033-022\*\*\*35.00

FILED
2016 AFR 25 FM 3: 00

1/2/20

## **COVER LETTER**

TO: Amendment Section Division of Corporations Calabria Condominium Association, Inc. Name of Corporation DOCUMENT NUMBER: NO 700003218 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: Lee Ballard, Esq. Name of Contact Person Tucker & Tighe, PA Firm/Company 800 E. Broward Blvd., Ste. 710 Fort Lauderdale, FL 33301 City/State and Zip Code law@tuckertighe.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kristina Trujillo 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 angelis submitted for a corporation organized under the laws of the State of Florida are to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Calabria Condominium Association, Inc.
2. The principal	office address: 8125 SW 27th Street, Miramar, FL 33025
3. The mailing a	address (if different): P.O. Box 245486, Pembroke Pines, FL 33024
4. Date of incor	poration/qualification: 03/28/2007 Document number: N07000003218
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)  Straley & Otto
	Straley & Otto
	2600 Stirling Road, Suite C-207
	Fort Lauderdale, FL 33312
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Tucker & Tighe, P.A.
	800 E. Broward Boulevard, Suite 710
	P.O. Box NOT acceptable Fort Lauderdale, FL 33301
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, lbe identical.
Such change wanthorized by the	as 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.
Signati	William It ORR TREASurer Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	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.
Sig	enature of Registered Agent Date
If signing on be	chalf of an entity:
Tucker	+ Tighe, P.A.  yped or Printed Name

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