

**N07000 004 201**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

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(City/State/Zip/Phone #)

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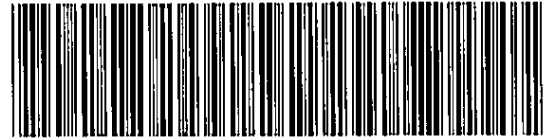
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 JUL 15 PM 3:09

*R.A. Rolch*

JUL 23 2019  
1 ALBRITTON

# SIEGFRIED RIVERA

MARIA VICTORIA ARIAS  
MARIAS@SIEGFRIEDRIVERA.COM

July 10, 2019

**VIA FEDERAL EXPRESS**

Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: The Courts at Bayshore Master Association, Inc.  
("Association")**

To Whom it May Concern:

Enclosed please find an original and one (1) copy of the Statement of Change of Registered Office or Registered Agent for the above referenced Association, together with our check in the amount of \$35.00 to cover the fee for filing same. Please date stamp the copy and return same to the undersigned in the enclosed self-addressed stamped envelope.

Should you have any questions, please do not hesitate to contact our office.

Sincerely,  


Maria Victoria Arias

MVA/blv  
Enclosures

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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: THE COURTS AT BAYSHORE MASTER ASSOCIATION, INC.
2. The principal office address: c/o Vesta Property Services
13595 S.W. 134th Avenue, Suite 108, Miami, FL 33186
3. The mailing address (if different):

4. Date of incorporation/qualification: 4/25/2007 Document number: N07000004201

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)

Vesta Property Services
6111 Broken Sound Parkway NW, Suite 200
Boca Raton, FL 33487

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

SKRLD, Inc.
201 Alhambra Circle, 11th Floor
Coral Gables, FL 33134

P.O. Box NOT acceptable

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.

X- [Signature]
Signature of an officer or director

Ferdinando Romero 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]
Signature of Registered Agent

7/9/19
Date

If signing on behalf of an entity:

Hecio De La Torre
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314