N07000010647

-R		(i)—
Registered A	Agent Solutionue Suite 2300 Aust	ons, inc
(Add	dress)	
(City	/State/Zip/Phone	e #)
PICK-UP	 WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
		-

Office Use Only



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12 3/10 or

VIA US MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: PINEBROOKE OFFICE PARK OWNERS' ASSOCIATION, INC.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

REGISTERED AFENT SOLUTIONS, INC.

Lenna Gazman

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 Floridain order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Pinebrooke Office Park Owners' Association, Inc.	
2. The principal office address 8775 FOLSOM BLVD, SUITE 200 SACRAMENTO CA 95826	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/31/2007 Document number: N0700001064	
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)	Ī
ABBOTT, SCOTT	1
5900 NORTH ANDREWS AVE STE 826	
FT LAUDERDALE FL 33309	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
REGISTERED AGENT SOLUTIONS, INC.	
155 Office Plaza Dr. Suite A	
P.O. Box NOT acceptable	
Tallahassee, FL 32301	
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 of director Carl D. Agnostton Director	
I hereby accept the appointment as registered agent and agree to act in this cupacity. 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, it 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 Kegistered Agent Signature of Kegistered Agent	
If signing on behalf of an entity:	
Jennifer Escobedo Asst. Secretary 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, TALLAMASSEE, FL 32314 CR2E045 (8/05)