## NO8552

(Re	equestor's Name)			
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S. YOUNG

## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: VILLAGE OF DORAL WOODS ASSOCIATION, INC.					
Name of Corporation					
DOCUMENT NUMBER: N08552					
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:					
Claudio Morandi					
Name of Contact Person					
UNLIMITED PROPERTY MANAGEMENT					
Firm/Company					
7665 NW 50th St.					
Address					
Miami, FI 33166					
City/State and Zip Code					
cmorandi@unlimitedpm.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Alberto J. Alonso  Name of Contact Person  Area Code & Daytime Telephone Number					
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  Street Address: Amendment Section					
Division of Corporations  Amendment Section  Division of Corporations					
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	mge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Flori on organized under the laws of the State	of Florida		
		r registered agent, or both, in the State			
1. The name of	the corporation: VILLAGE OF	DORAL WOODS ASSOCIA	ATION, INC.		
2. The principal	office address: 4815 NW 102	2 Ave, Doral, FL 33178			
3. The mailing a	address (if different):	roperty Management, 7665 NW 50th	n Street, Miami, FL 3316		
4. Date of incor	poration/qualification: 04/05/1	985 Document number: NO8	3552		
	d street address of the current regi- rtment of State: (If resigned, enter	stered agent and registered office on fileresigned)	e with the		
	WATSKY, MORRIS J		<b>19</b>		
	700 NW 107 AVE		AND THE		
	MIAMI, FL 33172		一部 里口		
6. The name an (if changed):	d street address of the new register	red agent (if changed) and /or registered	d office IDA		
		Y MANAGEMENT, LLC	<del></del>		
	7665 NW 50th STREET				
		Box NOT acceptable			
	MIAMI, FL 33166		<u> </u>		
The street addr as changed wil	ess of its registered office and the be identical.	e street address of the business office of	of its registered agent,		
Such change wauthorized by t	as authorized by resolution duly a he board, or the corporation has b	adopted by its board of directors or by been notified in writing of the change.	an officer so		
Eft	Andres Rivas				
l I hereby accept I further acree	to chambly with the provisions of	Printed or typed name at gent and agree to act in this capacity. all statutes relative to the proper and h and accept the obligation of my position reflect a change in the registered cotified in writing of this change.	complete		
hereby confirm	Matthe Corporation has been no	otified in writing of this change. 09   11   20 1			
Sig	gnature of Registered Agent	Date	<del></del>		
If signing on be	chalf of an entity:				
	T DUOG  yped 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 \* \* \*