

N090000000149

(Requestor's Name)

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TO: Amendment Section
Division of Corporations

SUBJECT: Shoppes at Avalon Property Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N09000000149

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:

Kathy Moro

Name of Contact Person

Frank Weinberg Black, P.L.

Firm/Company

7805 SW 6th Court

Address

Plantation, FL 33324

City/State and Zip Code

Lynda.Watkins@Stiles.com KMoro@fwblaw.net

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

For further information concerning this matter, please call:

Lynda Watkins

Name of Contact Person

at (954) 627-9350

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: Shoppes at Avalon Property Association, Inc.
2. The principal office address: 301 East Las Olas Boulevard; Fort Lauderdale, FL 33301
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/07/2009 Document number: N09000000149
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)

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE, FLORIDA 32301-2525

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

FRANK WEINBERG & BLACK P.L.

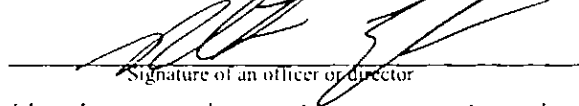
1875 NW CORPORATE BLVD SUITE 100
C/O STEVEN DEUTSCH, ESQ

P.O. Box NOT acceptable

BOCA RATON, FL 33431

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

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

9/6/2014

Date

If signing on behalf of an entity:

STEVEN W. DEUTSCH

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
CR2E045 (03/12)

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18 SEP 28 PM 4:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA