

N09718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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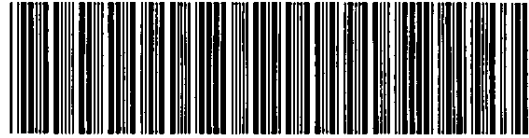
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF
TALLAHASSEE, FL

Ra Change

AUG 01 2016

D CUSHING



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 14, 2016

MOORS POINTE CONDOMINIUM ASSOCIATION, INC..
C/O FIRSTSERVICE RESIDENTIAL (02)
2950 N 28TH TERR
HOLLYWOOD, FL 33020

SUBJECT: MOORS POINTE CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N09718

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Please return your check with a note stating what the money is intended for.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 616A00014717

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16/AUG-31 AM 11:15

**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: MOORS POINTE CONDOMINIUM ASSOCIATION, INC.
2. The principal office address: 17321 NW 66 CT MIAMI, FL 33015
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/12/1985 Document number: N09718

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)

Brough, Chadrow & Levine, P.A.

1900 North Commerce Parkway

Weston, FL 33326

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

Brough, Chadrow & Levine, P.A.

2149 North Commerce Parkway

P.O. Box NOT acceptable

Weston, FL 33326

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.

Evelyn Stultz
Signature of an officer or director

EVELYN STULTZ
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

Date

If signing on behalf of an entity:

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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