111000011708

| (Re | equestor's Name) | | | | | |
|-----------------------------------------|--------------------|-----------------|--|--|--|--|
| (Ad | dress) | | | | | |
| (Ad | dress) | | | | | |
| (Cit | ty/State/Zip/Phone | ; #) | | | | |
| PICK-UP | MAIT | MAIL | | | | |
| (Business Entity Name) | | | | | | |
| (Do | ocument Number) | | | | | |
| Certified Copies | _ Certificates | s of Status | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



100281911371

02/15/16--01012--025 **35.00



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscqlobal.com

Date: February 11, 2016

Order#: 010118/003

Re: BAL HARBOUR CENTER CONDOMINIUM ASSOCIATION, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

| statement of cha | provisions of sections 607.0502, nge is submitted for a corporatio r to change its registered office o | n organi | ized under ti | he la | ws of the | State of | FL | |
|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------------------------|----------------|----------------------|-------------------|--------------------|-------------------|
| 1. The name of t | he corporation: BAL HARBOUR | CENTE | R CONDOM | IINIL | JM ASSC | CIATIO | N, INC. | |
| 2. The principal | office address: IARCO COURT, ORLANDO FL | | | | | | | |
| 3. The mailing a | ddress (if different): | | | <u> </u> | <u>-</u> | | | |
| 4. Date of incorp | poration/qualification: 12/21/201 | 1 | Docum | nent | number: | N11000 | 011708 | |
| | street address of the current regitment of State: (If resigned, enter | | | istere | ed office | on file w | ith the | |
| | C T CORPORATION SYSTEM | | | | | | | |
| | 1200 SOUTH PINE ISLAND RO | DAD | | | | | | |
| | PLANTATION | | | FL | 33324 | SEC | 2016 | |
| 6. The name and street address of the new registered agent (if changed) and /or register to file (if changed): Corporation Service Company | | | | | | | | |
| | 1201 Hays Street | | | | | FLOR | > | O |
| | | Box NOT | acceptable | r-, | 22204 | ¥ C | _ | |
| | Tallahassee | | | FL | 32301 | | | |
| The street addre | ess of its registered office and the be identical. | e street a | address of th | ne bu | siness of | fice of it | ts regist | ered agent, |
| Such change was authorized by the | is authorized by resolution duly it board, or the corporation has l | adopted seen not | by its board ified in writ | of of c | lirectors of the cha | or by an inge. | officer | so |
| _ Xie | 2. Cienie | _ | Jill Cilmi, V | | | | | |
| I hereby accept I further agree to performance of agent. Or, if the hereby confirm | the appointment as registered a comply with the provisions of my dulies, and I am familiar with the provisions of my dulies, and I am familiar with some filed merely that the corporation has been no Service Company | all statu h and ac | ites relative ecent the ob | ct in to th | e proper ion of m | city. and con | nplete n as reg | istered ess, I |
| By: Do | ace detabl | e | 02/09/201 | 6 | | | | |
| Sign | nature of Registered Agent | | | | Date | - | | |
| If signing on be | half of an entity: | | | | | | | |
| | Asst. Vice President | _ | | | | | | |
| 13 | rped of Finned Panie | | | | | | | |

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

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

| statement of cha | | .0502, 607.1508, or 617.1508, Florida rganized under the laws of the State of gistered agent, or both, in the State of | f FL |
|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 1. The name of | the corporation: BAL HARBOUR CE | NTER CONDOMINIUM ASSOCIATIO | ON, INC. |
| | office address: | 19 | |
| 3. The mailing a | address (if different): | | |
| 4. Date of incor | poration/qualification: 12/21/2011 | Document number: N1100 | 0011708 |
| | d street address of the current register rtment of State: (If resigned, enter res | ed agent and registered office on file vigned) | with the |
| | C T CORPORATION SYSTEM | | ~ |
| | 1200 SOUTH PINE ISLAND ROAD |) | |
| | PLANTATION | FL 33324 | ~ |
| 6. The name and (if changed): | d street address of the new registered | agent (if changed) and /or registered of | office |
| | Corporation Service Company | | SE SE |
| | 1201 Hays Street | | 2016 FEB |
| | | NOT acceptable | ASS ASS |
| | Tallahassee | FL 32301 | - ES D |
| The street addr | ess of its registered office and the str be identical. | reet address of the business office of | its registered egent, |
| Such change was authorized by the | as authorized by resolution duly ado he board, or the corporation has been | pted by its board of directors or by an n notified in writing of the change. | 1 offices so |
| Xie | 2 agnie | Jill Cilmi, Vice President | |
| I hereby accept I further agree performance of agent. Or, if th hereby confirm | my duties, and I am familiar with a | statutes relative to the proper and co nd accept the obligation of my position reflect a change in the registered off | emplete on as registered |
| By: Dr | sea Cotubile | 02/09/2016 | |
| | enature of Registered Agent chalf of an entity: | Date | |
| Grace E. Kirby | , Asst. Vice President | ••• | |
| 7 | Vined or Printed Name | | |

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