

N16599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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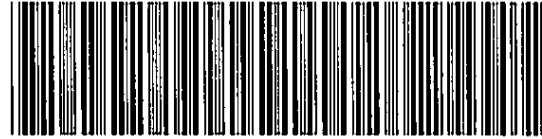
(Business Entity Name)

(Document Number)

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2019 MAY 22 PM 3:19

SEC. OF STATE  
TALLAHASSEE, FL.

JUN 04 2019  
C Kinsey

# SIEGFRIED RIVERA

MARIA VICTORIA ARIAS  
MARIAS@SIEGFRIEDRIVERA.COM

May 21, 2019

**VIA FEDERAL EXPRESS**

Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: The Atrium Homes at the Hammocks Homeowner' Association, Inc  
("Association")**

To Whom it May Concern:

Enclosed please find an original and one (1) copy of the Statement of Change of Registered Office or Registered Agent for the above referenced Association, together with our check in the amount of \$35.00 to cover the fee for filing same. Please date stamp the copy and return same to the undersigned in the enclosed self-addressed stamped envelope.

Should you have any questions, please do not hesitate to contact our office.

Sincerely,



Maria Victoria Arias

MVA/bly  
Enclosures

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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: The Atrium Homes at the Hammocks Homeowners Association, Inc.  
2. The principal office address: c/o Courtesy Property Management  
13250 SW 135 Avenue, Miami, FL 33186  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 9/2/86 Document number: N16599

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)

Carlos Triay, Esquire

3750 NW 87 Avenue, Suite 100

Miami, FL 33178

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

SKRLD, Inc.

201 Alhambra Circle, 11th Floor

P.O. Box NOT acceptable

Coral Gables, FL 33134

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]  
Signature of an officer or director

Esq. Armstrong  
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]  
Signature of Registered Agent

5/15/19  
Date

If signing on behalf of an entity:

Heio De La Torre  
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)

FILED  
2019 MAY 22 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FL