11391

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

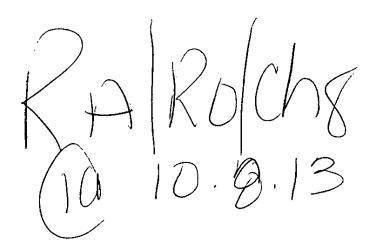
Office Use Only



600252098386

09/30/13--01025--097 **35.00

13 SET 30 AND 48



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Reflections at Mission Bay Homeowners' Association, Inc.

Name of Corporation

DOCUMENT NUMBER: N1/39

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:

Steven R. Braten, Esq.

Name of Contact Person

Steven R. Braten, P.A.

Firm/Company

500 Gulfstream Boulevard, Suite 104

Address

Delray Beach, FL 33483

City/State and Zip Code

sbraten@myassociationattorney.com

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

For further information concerning this matter, please call:

Steven R. Braten

_,561 270-3291

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
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

CR2E045 (03/12) ?

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

	provisions of sections 607.0502, 617.0502 ange is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of
in orde	er to change its registered office or registe	red agent, or both, in the State of Florida.
1. The name of	the corporation: REFLECTIONS AT MI	SSION BAY HOMEOWNERS' ASSOCIATION, IN
2. The principal	office address: 10550 Vista Grand	e, Boca Raton, FL 33497
3. The mailing	address (if different): 9045 LaFontana	a Boulevard, Suite 101, Boca Raton, FL 3343
4. Date of incom	poration/qualification: 10/17/1986	Document number: N17391
	d street address of the current registered ag artment of State: (If resigned, enter resigned	•
	Steven R. Braten, Esq.	
	551 SE 8th Street, 4th Floor	
	Delray Beach, FL 33483	
6. The name an (if changed):	d street address of the new registered agen	nt (if changed) and /or registered office
	Steven R. Braten, P.A.	
	500 Gulfstream Boulevard, S	uite 104
	P.O. Box NOT	acceptable
	Delray Beach, FL 33483	
		address of the business office of its registered agent,
Such change wanthoused by	vas authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an officer so tified in writing of the change.
Signal	tyle of an officer or director	ALLEN FRIEDMAN, PRESIDENT Printed or typed name and title
I further agræe performance o	t the appointment as registered agent and to comply with the provisions of all state f my duties, and I am familiar with and a his document is being filed merely to reflect that the corporation has been notified in	d agree to act in this capacity. utes relative to the proper and complete ccept the obligation of my position as registered ect a change in the registered office address, I n writing of this change.
		6/12/2013
	gnature of Registered Agent	Date
If signing on b	ehalf of an entity:	
Steven R.	Braten Typed or Printed Name	
	Typea or Crimea Hame	

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