

N19146

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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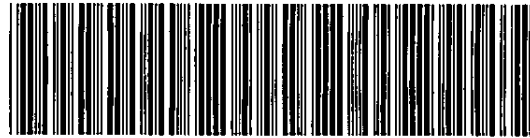
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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**FERNANDO J. PORTUONDO, P.A.**

**• ATTORNEY AT LAW •**

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CORAL GABLES, FL 33134

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December 10, 2014

Florida Department of State  
Division Of Corporations  
**Amendment Section**  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: The Poinciana Village Condominium Association, Inc.; Document No. N19146**

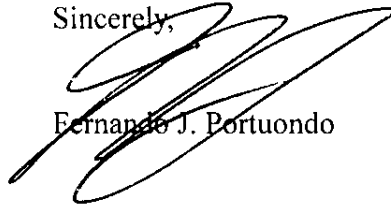
Dear Sir/Madam:

Enclosed please find a fully executed Statement Of Change Of Registered Office Or Registered Agent Or Both For Corporation, and our check in the amount of \$35.00 representing your filing fee.

Please provide a copy of the filed Statement Of Change in the enclosed self-addressed envelope.

Should you have any questions or comments, please do not hesitate to contact the undersigned. Thank you for your time and attention.

Sincerely,



Fernando J. Portuondo

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** THE POINCIANA VILLAGE CONDOMINIUM ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N19146

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:

Fernando J. Portuondo, Esq.

Name of Contact Person

Fernando J. Portuondo, P.A.

Firm/Company

2121 Ponce De Leon Blvd., Suite 950

Address

Coral Gables, Florida 33134

City/State and Zip Code

Fernando@Portuondo-Law.com

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

For further information concerning this matter, please call:

Fernando J. Portuondo, Esq/ at (305) 567-9953

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

**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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: THE POINCIANA VILLAGE CONDOMINIUM ASSOCIATION, INC.

2. The principal office address: 7665 NW 50th Street, Miami, FL 33166

3. The mailing address (if different): 7665 NW 50th Street, Miami, FL 33166

4. Date of incorporation/qualification: 02/10/87 Document number: N19146

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)

Carla Jones, Esq.

1999 SW 27th Avenue

Miami, FL 33145

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

Fernando J. Portuondo, P.A.

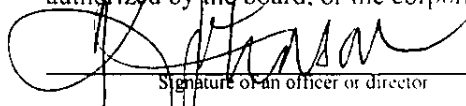
2121 Ponce De Leon Blvd., Suite 950

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 of an officer or director

Kaye Johnson, President

\_\_\_\_\_  
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

12/8/14  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Fernando J. Portuondo, Esq.

\_\_\_\_\_  
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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