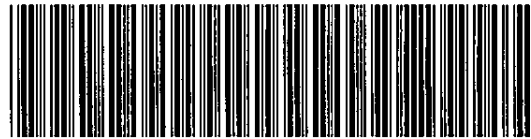


N119588



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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mayfair at Jacaranda Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N19588

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:

Amanda Geus
Name of Contact Person
Atlantis Management Services, LC
Firm/Company
11011 Sheridan Street, Suite 208
Address
Cooper City, FL 33026
City/State and Zip Code
amanda@atlantis-management.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheryl Levin at (954) 742-9034
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Mayfair at Jacaranda Homeowners Association, Inc.
2. The principal office address: c/o Atlantis Management Services
11011 Sheridan Street, Suite 208, Cooper City, FL 33026
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/09/1987 Document number: N19588

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)

Marc Rodriguez
c/o Association Services of Florida
10112 USA Today Way, Miramar, FL 33025

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

Cheryl J. Levin, P.A.
Courtyard Business Center
P.O. Box NOT acceptable
4694 NW 103 Avenue, Sunrise, FL 33351

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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.

Ronnie Heller
Signature of an officer or director

Ronnie Heller
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.

Cheryl J. Levin
Signature of Registered Agent

12/29/16
Date

If signing on behalf of an entity:

Cheryl J. Levin
Typed or Printed Name

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