N22087

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C. CARROH....

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Hidden Oaks Homeowners Association, Inc.

DOCUMENT NUMBER: N22087

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:

Jamie Tarich

Name of Contact Person

The Tarich Law Firm P.A.

Firm/Company

19495 Biscayne Blvd #606

Address

Aventura, FL 33180

City/State and Zip Code

jamie@thetarichlawfirm.com

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

For further information concerning this matter, please call:

Jamie Tarich

305

Name of Contact Person

Anni Cala di Dandinia Talantana Nissa

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 Circ

2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

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	1. I
in order to change its registered office or registered agent, or both, in the State of Florida AUG 25	10: 50
1. The name of the corporation: Hidden Oaks Homeowners Association, Inc.	10. 30
2. The principal office address: c/o Courtesy Property Managment 13250 SW 135 Avenue, Miami, Florida 33186	·法证 公的意
3. The mailing address (if different):	
4. Date of incorporation/qualification: 08/18/1987	
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)	
Halpern, Marc Esq.	
800 Douglas Road Suite 880	
Coral Gables, Florida 33134	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
The Tarich Law Firm P.A.	
19495 Biscayne Blvd. Suite 606	
P.O. Box NOT acceptable Aventura, Florida 33180	
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.	
Symmetric or an oracle or agrector Symmetric or an oracle or agrector Printed or Typed hains and tale	
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 auties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document, is found to the merely to reflect a thange in the registered affice address, I hereby confirm that the corporation has been notified in writing of this change.	
Mgnatury Af Resident od Agent	
If sixpring on behalf of an entity: Jemie Toric (00) Typed or Printed Name	

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (03/12)

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