123209

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MAINTENANCE ASSOCIATION, INC. Name of Corporation
DOCUMENT NUMBER: N 23209
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:
ANTONIO VALCARCEL Name of Contact Person ANTONIO VALCARCEL, CPA, PA Firm/Company 7700 N. KENAMILL OK. #606 Address
City/State and Zip Code TONY_VE BELLSOUTH, NET E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
A NTONIO VALCHRELL at (786) 253-1079 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)

6TATEMENT 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 F 40 R 10 A
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: MAINTENAINEE ASSOCIATION, INC.
2. The principal office address: 7700 M. HEMONIC DR. #606
MIAMI, FL 33156
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/28/87 Document number: N 23209
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)
BROUGH, CHADROW & LEVINE, PA
1900 N. COMMERCE PARKWAY
WESTON, FL 33326
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): JOYCE GOODMAN - GUENTHER, P.A. 10723 SWIOY ST. PO. Box NOT acceptable MIAMI, FL 33176
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.
Muselia Acade Aurelia Acasta PRESISENT Signature of an officer or director Princed 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.
dignamire of Registered Agent Date
If signing on behalf of an entity:
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
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