N24679

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	; #)
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(Document Number)		
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ALLAHASSEE, FLORIDA

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COVER LETTER

Amendment Section TO: Division of Corporations Bay Harbor Towers Condominium Association, Inc. Name of Corporation N24679 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: Mara Alyson, Esq. Name of Contact Person Saavedra Goodwin 312 S.E. 17th St., Second Floor Ft. Lauderdale, FL 33316 City/State and Zip Code malyson@saavlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mara Alyson Name of Contact Person 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: Bay Harbor Towers Condominium Association, Inc.		
2. The principal office address: 10141 E. Bay Harbor Drive, Bay Harbor Island, FL 33154		
2. The principal office address.		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 2/4 /1988 Document number: N24679		
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)		
Mara Alyson, Esq.		
Mara Alyson, P.A.		
11760 W. Sample Rd., Ste 105, Coral Springs, FL 33065		
6. The name and street address of the new registered agent (if changed) and /or registered office.		
(if changed): Mara Alyson, Esq., Saavedra Goodwin		
312 S.E. 17th Street, Second Floor		
P.O. Box NOT acceptable		
Fort Lauderdale, FL 33316		
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 of director MRA ALYSON - Attorney in Fact 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 1/4/2016 Date		
If signing on behalf of an entity:		
Mara Alyson		
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