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Certified Copies	Certificates	of Status
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EXAMINER

COVER LETTER

SUBJECT: Carmel Lakes Condominium Abo 10 Assoc. Tive

Name of Corporation

DOCUMENT NUMBER: D4860

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Steve Lippman
Name of Cortact Person

First Choice Property Mgmt Group INC
Firm/Company

4755 Technology Way Ste 202

SLIPPMAN @ FCPMCINC , COM

For further information concerning this matter, please call:

Jenn Les M. + chell at (561) 910 - 789

Nante of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Please return all correspondence concerning this matter to the following:

Mailing Address:
Amendment Section
Division of Corporations

P.O. Box 6327 Tallahassec, FL 32314 Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

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. The name of the corporation: Carmel Lakes Condominium NO. 10 ASS
2. The principal office address: First Choice Property Management Group.
4755 Technology Way, Suite 202, Boca Ration, F1 33
3. The mailing address (if different): Sume as whove
4. Date of incorporation/qualification: 02/15/1980 Document number: N 24860
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)
Phoenix Mungement Services
4800 N. State Road 7, Suite 105
Lauderdate Lakes, P1 33319
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
First Choice Property Mungement Group, Inc
4755 Technology Way, Suite 202
Boca Ration, P1 33431
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. 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.
Jenseler Statelle 11/10/11 Synature 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
CR2E045 (8/05)