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RETARY OF STATE
AHASSEE. FLORIDA

THE TARK OF STATE
AND STAT

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: BELFORT CONDOMINIUM R ASSOCIATION, INC. (Name of Corporation)					
DOCUMENT NUMBER: N25928					
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:					
STEVEN S. (Name of Conta	VALANCY act Person)				
,	,				
JENNINGS & VALANCY, P.A. (Firm/Company)					
(Firm/Com	npany)				
244.05.405					
311 SE 13TH STREET (Address)					
·	33)				
EODT I AUDEDDA	E ELODIDA 22216				
FORT LAUDERDALE, FLORIDA 33316 (City/State and Zip Code)					
For further information concerning this matter, please call:					
DONNA AVEN (Name of Contact Person)	at (<u>954</u>) 463-1600 (Area Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address: Amendment Section	Street Address: Amendment Section Division of Corporations				
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sange is submitted for a corporation organized under the laws of the State of \underline{F} represents to change its registered office or registered agent, or both, in the State of Fl	LORIDA	
1. The name of	the corporation: BELFORT CONDOMINIUM R ASSOCIATION, I	NC.	
2. The principal	office address: C/O SUNDANCE PROPERTY MANAGEMENT,		
3275 WES	ST HILLSBORO BOULEVARD, SUITE 312, DEERFIELD BEA	CH, FLORIDA	<u>3344</u> 2
3. The mailing a	ddress (if different):		
4. Date of incor	poration/qualification: 04/15/1988 Document number: N25928	<u> </u>	
	street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned)	h the	
	KATZMAN GARFINKEL, P.A.		
	1501 N.W. 49TH STREET SUITE 202	2009 SE TAL	and the state of
	FT. LAUDERDALE, FLORIDA 33309	SECRETA TALLAHA	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offi	29 PM TARY OF ASSEE. F	
	STEVEN S. VALANCY	PM 4: 42 OF STATE EE. FLORID	
	311 SE 13TH STREET	15 15	
	(PO. Box NOT acceptable)		
	FORT LAUDERDALE, FLORIDA 33316	-	
The street address changed will	ess of its registered office and the street address of the business office of its be identical.	s registered agent,	
Such change wanthorized by the	as authorized by resolution duly adopted by its board of directors or by an ne board, or the corporation has been notified in writing of the change.	officer so	
Alamat (Signat	are of an officer or difficult. (Printed or typed name and to	(411)	RES.
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comid I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I herebs been notified in writing of this change.	plete performance agent. Or, if this y confirm that the	
481	gnature of Registered Alent) DECEMBER 2, 2 (Date)	2008	
	chalf of an entity:		
	EVEN S. VALANCY EVEN S. VALANCY EVEN S. VALANCY		

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