

N31408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

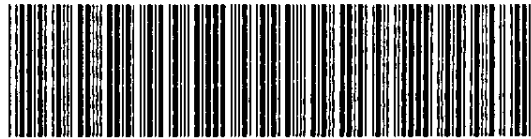
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Kristine Klenetsmo
gave permission to
add new RA
Name. *DK*

Office Use Only

3/3/11



800194385408

02/17/11--01024--018 **35.00

RECEIVED
11 MAR -2 AM 8:58
STATE OF MICHIGAN

RA Change

3/3/11

DK



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2011

KRISTINE KLEMETSMO
LUXE PROPERTY SERVICES
685 E. HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441

SUBJECT: LAKEVIEW TOWNHOMES HOMEOWNERS ASSOCIATION, INC.
Ref. Number: N31408

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

PLEASE LIST THE NAME OF THE NEW REGISTERED AGENT UNDER SECTION #6 OF THE DOCUMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Letter Number: 711A00004332

RECEIVED

11 MAR -2 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Darlene Connell
Regulatory Specialist II

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lakeview Townhomes Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N31408

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:

Kristine Klemetsmo
Name of Contact Person

LUXE Property Services
Firm/Company

685 E Hillsboro Blvd
Address

Deerfield Beach, FL 33441
City/State and Zip Code

Kris@LUXEpropertyservices.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristine Klemetsmo at (954) 418-6650
Name of Contact Person Area Code & Daytime Telephone Number
#209

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: Lakeview Townhomes Homeowners Association, Inc.

2. The principal office address: 740 SE 1 Way, Deerfield Beach, FL 33441

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1989 Document number: N31408

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)

JEROME M. BIELER, LCAM - GATOR MGMT. OF SO. FL.
615 Emerald Way East
Deerfield Beach, Florida 33442

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

685 E Hillsboro Blvd.
Deerfield Beach, Florida 33441
P.O. Box NOT acceptable
LUXE PROPERTY SERVICES, INC.

FILED
11 MAR - 2 AM 8:59

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]
Signature of an officer or director

Scott RUBIN V.P.
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]
Signature of Registered Agent

2/14/11
Date

If signing on behalf of an entity:
Kristine Klemetsmo
Typed or Printed Name

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