Sent By: Steinberg & Yaffe, P.A.;

. Division of Corporations

P.A.; 305 538 0419; Jun-10-99 10:23AM; 305 538 0419; Jun-10-99 10:23AM;

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Florida Department of State

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99 JUN 10 AMII: 47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

CARRIAGE CLUB SOUTH CONDOMINIUM ASSOCIATION, INC.

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## 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, the undersigned corporation organized under the laws of the State of Florida	
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation is: <u>Carriage Club South Condominium Association</u> , l	nc
2. The mailing address of the corporation is: 5001 Collins Avenue, Miami Beach, FL 331	.40
3. Date of incorporation/qualification: 05/02/1989 Document number: N32058	
4. The name and address of the current registered agent and office:	
Carriage Club South	
5001 Collins Avenue	
Miami Beach, Florida 33140  5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)	
Robert H. Yaffe, Esquire	
767 Arthur Godfrey Road	
Robert H. Yaffe, Esquire  767 Arthur Godfrey Road  Miami Beach, Florida 33140-3413	
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.	
1 ALICA (1 0 a A 1 15-09	
(Signature of an officer, challman or vice chairman of the board) (Date)	
Leslie Katz, President (Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the above stated corporation, 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.	
Soldisch 6-13-90 (Styhalure of Registered Agent) (Date)	
(Signature of Registered Agent) (Date)  If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity) Richard L. Steinberg, Esq.	
767 Arthur Godfrey Rd. *** FILING FEE: \$35.00 ***	
Miami Beach, FL 33141 (305) 538-2344 H99000014052 9 Division of Corporations P.O. Box 6327 TALLAHASSEE, FL 32314 Fla. Bar 147958	