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PRO

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: THE FLAMINGO PLAZA CONDOMINIUM ASSOCIATION, INC. (Name of corporation)	•
DOCUMENT NUMBER: N4151	
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:	
BONNIE STANFORD (Name of contact person)	
(Name of contact person)	
STREAMLINE PROPERTIES (Firm/Company)	
(Firm/Company)	
1125 WASHINGTON AVENUE (Address)	
MIAMI BEACH, RL 33139 (City/state and zip code)	
For further information concerning this matter, please call:	
BONNIE STANFORD at (305) 455-1329 (Name of contact person) (Area code & daytime telephone number)	

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 409 E. Gaines Street Tallahassee, FL 32399

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

statement of chan	ge is submitted for a corporat	2, 617.0502, 607.1508, or 617.150 tion organized under the laws of th e or registered agent, or both, in th	he State of <u>Flonda</u>	
	ffice address: 1051 M	mingo Plaza Condo enidian Are. Beach Fe 331		<u>In</u>
1125	dress (if different): <u>Clo</u> S Washington	treamline Prop Avenue, Miami	perties Beach, Fr 3313	9
•	street address of the current re	Document number		
-	BENNETT, SI8 NE - MIAMI, FI	12 STREET	As s	
6. The name and s (if changed):	SAUL GRUCIO STREAMUI	tered agent (if changed) and /or resolved NE PROPERTIES Tacceptable) AVENUE H, FW 33139	SMAY 25 PM I2: 57 ECRETAKY OF STATE LAHASSEE. FLORIDA	777
The street address as changed will b	s of its registered office and e identical.	the street address of the business	s office of its registered agent,	
Signature [hereby accept the	of an officer of directors the appointment as registered comply with the provisions of am familiar with and acces of filed merely to reflect a chieven notified in writing of the control of Registered Agent)	ly adopted by its board of directors been notified in writing of the control of t	MITH SECNETAN	7
	ped or Printed Name)			

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