

N 44300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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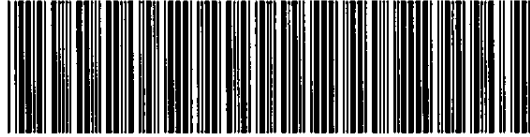
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 13 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MYSTIC POINTE TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N44300

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:

William G. Essig, Esq.

Name of Contact Person

ESSIG LAW GROUP, P.A.

Firm/Company

10691 North Kendall Drive, Suite 206

Address

Miami, Florida 33176

City/State and Zip Code

wessig@essiglawgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leonard Hirsch

Name of Contact Person

at (**305**) **931-1013**

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
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: Mystic Pointe Townhouses Condominium Association, Inc.

2. The principal office address: 3530 Mystic Pointe Drive, Suite 1002, Miami, Florida 33180

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/15/1991 Document number: N44300

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)

SKRLD, Inc.

201 Alhambra Circle, Suite 1102

Coral Gables, Florida 33134

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

Essig Law Group, P.A.

10691 North Kendall Drive, Suite 206

P.O. Box NOT acceptable

Miami, Florida 33176

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.

Tate Waters
Signature of an officer or director

TATE WATERS VP
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.

W Essig
Signature of Registered Agent

4-7-15
Date

If signing on behalf of an entity

William G. Essig, Esq.

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 (03/12)

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