N9200000933

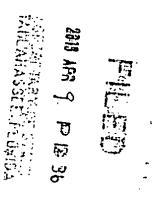
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APR 17 2010 T. LEMIEUX

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Emerald Lake Village, Inc.					
Name of Corporation					
DOCUMENT NUMBER: N9200000938 .					
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:					
Mado Gagnon, CAM					
Name of Contact Person					
Emerald Lake Village, inc.					
Firm Company					
5551 East Lake Drive					
Address					
Fort Lauderdale, Fl 33312					
City/State and Zip Code					
info@emeraldlakevillage.net					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
·					
Mado Gagnon Name of Contact Person Name of Contact Person at (954) 966-9146 Area Code & Daytime Telephone Number					
Name of Contact reison Area Code & Daytime receptione 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 Street Address: Amendment Section 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, 6 ange is submitted for a corporation organize er to change its registered office or registere	ed under the laws of the State of Florid	da
1. The name of	the corporation: Emerald Lake Village	ge, Inc.	<u></u>
2. The principal	Loffice address: 5551 East Lake Dri	ve	
<u> </u>	Fort Lauderdale, Fl	33312	
3. The mailing a	address (if different):		
4. Date of incor	poration qualification: 12/24/1992	Document number: N9200000	00938
	d street address of the current registered agei artment of State: (If resigned, enter resigned)	nt and registered office on file with the	2
	Rejean Beaulac		
	5450 SW 24th Ave		
	Fort Lauderdale, FI 33312	3	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of fice	Andreas
	Rejean Beaulac	7. F.	
	5462 SW 24th Ave	27(3 d	2
	Fort Lauderdale, Fl 33312	eptable	
The street addre	ess of its registered office and the street add I be identical.	lress of the business office of its regi	stered agent.
Such change wa authorized by the	as authorized by resolution duly adopted by he board, or the corporation has been notified	its board of directors or by an office ed in writing of the change.	T SO
Me o	ore of an officer or director	RESEAN THE AUCK Printed or typed name and title	1C
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and a to comply with the provisions of all statutes (my duties, and I am familiar with and acce its document is being filed merely to reflect that the corporation has been notified in w	s relative to the proper and complete pt the obligation of my position as re a change in the registered office add witing of this change.	
	He Lewisered Agent	APR 5th 201	9
V	chalf of an entity:		•
	yped or Printed Name		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 (CR2E045 (03/12)

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