N) 93000004551

| | CASTLE GROUP | |
|----------|------------------------------------|--------|
| City/Sta | | 1 |
| City/Sta | Box 189013 Plantation, FL 33318 | hone # |

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1 | (Corporation Name) | (Document #) | |
|----------------------|---------------------------|--|--|
| 2 | (Corporation Name) | (Document #) | |
| 3 | (Corporation Name) | (Document #) | |
| 4 | (Corporation Name) | | |
| | | (Document #) | |
| ☐ Walk in ☐ Mail out | ☐ Pick up time☐ Will wait | Certified Copy Photocopy Certificate of Status | |

| NEWFILINGS |
|-------------------|
| Profit |
| NonProfit |
| Limited Liability |
| Domestication |
| Other |

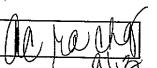
| AMENDMENTS |
|---|
| Amendment |
| Resignation of R.A., Officer/Director |
| Change of Registered Agent |
| Dissolution/Withdrawal |
| Мегдет |

| OTHER FILINGS |
|------------------|
| Annual Report |
| Fictitious Name |
| Name Reservation |

| REGISTRATION/ QUALIFICATION |
|-----------------------------|
| Foreign |
| Limited Partnership |
| Reinstatement |
| Trademark |
| Other |
| |



Examiner's Initials



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 Granville Condominium H Association, Inc. |
| |
| 2. The mailing address of the corporation is: c/o Castle Management, Inc. |
| P.O. Box 189013, Plantation, FL 33318 |
| 3. Date of incorporation/qualification: 10/07/1993 Document number: N93000004551 |
| 4. The name and address of the current registered agent and office: |
| Exclusive Property Management, Inc. |
| 1280 S.W. 36th Avenue, Suite 301 |
| Pompano Beach, FL 33069 |
| 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable) |
| Castle Management, Inc. |
| 4450 West Sunrise Boulevard, Suite 100 |
| Plantation, FL 33313 |
| 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. |
| Mr PLES 8.11-99 |
| (Signature of an officer, chairman or vice chairman of the board) |
| MIKE MEYER 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 |
| August 10, 1999 |
| (Signature of Registered Agent) (Date) |
| If signing on behalf of an entity: Gail H. Sangunett Vice President - Administration |
| (Typed or Printed Name) (Capacity) |
| * * * FIT INC EFF. 225 00 + * + |

CR2E045(7/97)