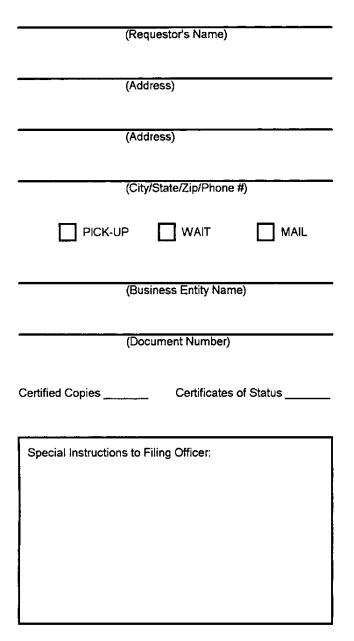
N9400002315







300290294903

10/04/16--01007--027 **70.00

OCT 07 2016
R. WHILE

16 001 -3 PH 3: 56

COVER LETTER

Amendment Section Division of Corporations TO: POINT LAKE CONDOMINIUM ASSOCIATION TWO, INC. SUBJECT: Name of Corporation N94000002315 **DOCUMENT NUMBER:** 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: Grisel Morales, Esq. Name of Contact Person Muinos & Morales P.L. Firm/Company 300 Sevilla Avenue Suite 301 Address SHIP Hones Coral Gables, FL 33134 City/State and Zip Code gmorales@msquaredlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Grisel Morales, Esq. 305 403-0641 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

n ne reeden en metale

CR2E045 (03/12)

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

Pursuant to the	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statut cange is submitted for a corporation organized under the laws of the State of Florid	es, this da
in ord	er to change its registered office or registered agent, or both, in the State of Florid	a.
1. The name of	the corporation:	
	C/O Muinos & Morales P.L., 300 Sevilla Avenue Suite bles, Florida 33134	301
3. The mailing	address (if different):	
4. Date of inco	rporation/qualification: Document number: N9400002	315
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned) Barbara Rosas	
	8785 SW 165 AVE SUITE 200	Ţ., <u>-</u>
	MIAMI, FL 33193	6 0CT
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	1+3 PH
	Muinos & Morales P.L.	် ကို လ
	300 Sevilla Avenue Suite 301	56 50 €
	P.O. Box NOT acceptable Coral Gables, Florida 33134	
The street addr	ress of its registered office and the street address of the business office of its registly to the desired of its registered.	stered agent,
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by an office he board, or the corporation has been notified in writing of the change.	r so
K frufu	ure of an officer or director Or (an aloo Dugget Printed or typed name and title)	esident
I further agree performance of agent. Or. if th	t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as re is document is being filed merely to reflect a change in the registered office additional the corporation has been notified in writing of this change.	gistered ress, I
- Ga	mature of Rogeiste feel Agent 9/28/1/0.	
If signing on be	chalf of an entity:	
Grisel Moral	es, Esq.	
	yped or Printed Name	

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