

N94000003202

(Requestor's Name)

GLAZER & ASSOCIATES, P.A.  
ONE EMERALD PLACE  
3113 STIRLING ROAD  
SUITE 201  
HOLLYWOOD, FLORIDA 33312

PICK-UP     WAIT     MAIL

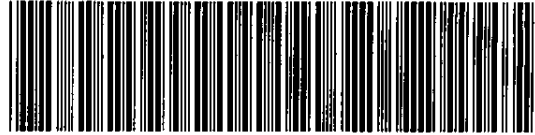
(Business Entity Name)

(Document Number)

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FALLHASSEE, FLORIDA

APPROVED  
AND  
FILED

*Handwritten signature and date: 5/14/10*

**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: SANS SOUCI CONDOMINIUM ASSOCIATION, INC

2. The principal office address: 11960 NE 19 DR  
OFFICE BOX, MIAMI, FLORIDA 33181

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 6/23/1994 Document number: N94000003202

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)

MICHAEL HALBERG, ESQ

10800 BISCAYNE BLVD #988

MIAMI, FLORIDA 33161

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

GLAZER & ASSOCIATES, P.A.

3113 STIRLING ROAD SUITE 201

P.O. Box NOT acceptable

HOLLYWOOD, FLORIDA 33312

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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.

  
Signature of an officer or director

Zenaida Ortiz  
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.

  
Signature of Registered Agent

5/11/10  
Date

If signing on behalf of an entity:

ERIC GLAZER  
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