

N94000005055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

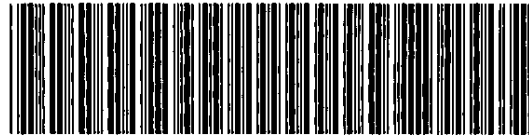
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

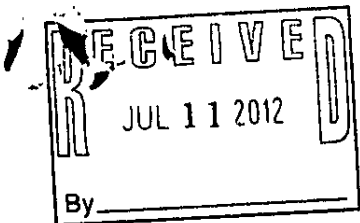


000238198990

08/06/12--01017--028 **35.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG - 6 AM 10:38

RA/RO/chs
@ 8.9.12



COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Genesis at The Landings - Change Registered Agent
Name of Corporation

DOCUMENT NUMBER: N94000005655

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:

Susan Orsini
Name of Contact Person

American Management Group
Firm/Company

1806 N. Flamingo Road, Suite 410
Address

Pembroke Pines, FL 33028
City/State and Zip Code

info@amgorg.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Orsini at (954) 458-5557
Name of Contact Person 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: Genesis at The Landings Homeowners Association, Inc.
2. The principal office address: 1806 N. Flamingo Road, Suite 410 Pembroke Pines, FL 33028
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/16/1994 Document number: N94000005655
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)

BACHE, LARRY

9000 WEST SHERIDAN STREET SUITE 174

PEMBROKE PINES FL 33024 US

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

Steven Reed Cohen, P.A.

5599 S. University Drive, Suite 303

P.O. Box NOT acceptable

Davie, FL 33328

SECRETARY OF STATE
DIVISION OF CORPORATIONS
AUG - 6 AM 10:38

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]
Signature of an officer or director

Ibrahim Youssef / President
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]
Signature of Registered Agent

7/9/12
Date

If signing on behalf of an entity:

Steven Cohen Pres./Atty
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