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SECRETARY OF STATE DIVISION OF CORPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Porto Vita Property Owners Association, Inc. (Name of Corporation)			
DOCUMENT NUMBER: N9500000607			
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:			
Lisa A. Lerner, Esquire (Name of Contact Person)			
(Name of Contact Person)			
Siegfried, Rivera, Lerner, De La Torre & Sobel, P.A.			
(Firm/Company)			
201 Alhambra Circle, Suite 1102			
(Address)			
Coral Gables, FL 33134			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Lisa A. Lerner at ((Name of Contact Person)	305) 442-3334 rea Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section	Street Address: Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		
	rananassuu, rl jajur		

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 statement of change is submitted for a corporation organized under the	
in order to change its registered office or registered agent, or b	•
The name of the corporation: Porto Vita Property Owners Ass	enciation Inc
2. The principal office address: 20105 NE 38th Court. Aventura	
2. The principal office address. 20100 NE 30th Court. Aveilula	, 1 lolida 33 loo
3. The mailing address (if different):	
4. Date of incorporation/qualification: February 7, 1995 Documer	nt number: _DN9500000607
5. The name and street address of the current registered agent and register Florida Department of State: (If resigned, enter resigned)	ered office on file with the
Stuart Israelson	
20105 NE 38th Court	08 DI
Aventura, FL 33180	25 CF
6. The name and street address of the new registered agent (if changed) a (if changed):	VISION OF CORPORATIONS NOT CORPORATION and /or registered office
SKRLD, Inc.	29
201 Alhambra Circle, Suite 1102 (P.O. Box NOT acceptable)	
Coral Gables, FL 33134	. <u></u>
The street address of its registered office and the street address of the as changed will be identical.	business office of its registered agent,
Such change was authorized by resolution duly adopted by its board authorized by the beard, of the corporation has been notified in writing	of directors or by an officer so ag of the change.
M. cool, or cool,	THATT ISPAELSON
I hereby accept the appointment as registered agent and agree to act I further agree to comply with the provisions of all statutes relative to of my duties, and I am familiar with and accept the obligation of my produced to be document is being filed merely to reflect a change in the registered of corporation has been notified in writing of this change.	Printed or typed name and title) in this capacity, the proper and complete performance position as registered agent. Or, if this fice address, I hereby confirm that the
Lon a fere. (Signature of Registered Agent)	12/17/08
If signing on behalf of an entity:	· ·
Lisa A. Lerner, Secretary (Typed or Printed Name)	
* * * FII INC FFF. \$25.00 * *	· *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)