N950000000842

| (R | equestor's Name) | |
|-------------------------|---------------------|---------------------------------------|
| (A | ddress) | |
| (A | ddress) | |
| (0 | ity/State/Zip/Phone | #) |
| PICK-UP | WAIT | MAIL |
| (B | usiness Entity Nam | e) |
| (D | ocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
|) | *OfficerUserOnly | · · · · · · · · · · · · · · · · · · · |



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SECRETARY OF SIME

RARDIMS

(10 11.54.14

COVER LETTER

Amendment Section Division of Corporations

TO:

| SUBJECT: Sierra Ridge C | ondominium E-1 Ass Name of Corporation | ociation , Inc. |
|--|---|--|
| | | |
| DOCUMENT NUMBER: | N950000008 | 62 |
| The enclosed Statement of Change of | Registered Office/Agent and | fee are submitted for filing. |
| Please return all correspondence conc | erning this matter to the follo | wing: |
| | DANIEL WASSERSTE | HN. |
| · · · · · · · · · · · · · · · · · · · | Name of Contact Person | |
| | | |
| | WASSERSTEIN, P.A | 1 |
| | Firm/Company | |
| 6501 (| CONGRESS AVENUE, S | SUITE 100 |
| | Address | |
| | BOCA RATON, FL 334 City/State and Zip Code | |
| DAN | NW@WASSERSTEINPA | A.COM |
| E-man address: (| 'io oe asea for fathe amus | ir report notification) |
| For further information concerning th | is matter, please call: | |
| DANIEL WASSERS | TEIN at (56 | 51 288-3999 Code & Daytime Telephone Number |
| Name of Contact Person | οἡ Area | Code & Daytime Telephone Number |
| Enclosed is a \$35.00 check made payer | able to the Department of Sta | te. |

Street Address: Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (8/05)

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA | |
|---------------------------------|---|----------|
| | er to change its registered office or registered agent, or both, in the State of Florida. | |
| | the corporation: Sierra Ridge Condominium E-1 Association, Inc. | |
| 2. The principal | office address: 21300 NE 10th AVENUE, N. MIAMI BEACH, FL 33179 | |
| 3. The mailing a | address (if different): N/A | |
| 4. Date of incorp | poration/qualification; 2/22/1995 Document number: N95000000862 | |
| | d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned) | |
| | LINDSAY RAPHAEL, ESQ., C/O TRIPP SCOTT, P.A. | |
| | 110 SE 6th STREET, 15th FLOOR | |
| | FORT LAUDERDALE, FL 33301 | |
| 6. The name and (if changed): | FORT LAUDERDALE, FL 33301 d street address of the new registered agent (if changed) and /or registered office | 52 1 |
| | WARREDOTEN DA | |
| | | ψž |
| | BOCA RATON, FL 33487 | |
| The street address changed will | ress of its registered office and the street address of the business office of its registered agent | <u> </u> |
| Such change wauthorized by the | ras authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. | • |
| Statistic | une of an explorer of director President | + |
| | I 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 performance and I am familiar with and except the obligation of my position as registered agent. Or, if the ining filed merely to reflect a change in the registered office address, I hereby confirm that the shape notified in writing of this change. | 200 |
| | Muture of Regulated Agent | |
| If signing on be | ehalf of an entity: | į |
| 1) Bire | Typed or Printed Name | ł |
| | 4.4.4. THE BALC THE . 625 OR 4.4.4 | |

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, F1. 32314 CR2E045 (8/05)