| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nar | ne) |
| (Document Number) | | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

| SUBJECT: The Courts at Sou | th Beach Condor Name of Corporation | minium Association | |
|---|---|---|----|
| | rand of Corporation | on | |
| DOCUMENT NUMBER: | 6505842 | 267 | |
| The enclosed Statement of Change of R | legistered Office/Agent | and fee are submitted for filing. | |
| Please return all correspondence concer | ming this matter to the fo | ollowing: | |
| | | | |
| ··· | Gerardo Palacio | os | |
| | Name of Contact Per | rson | |
| | | | |
| | Firm/Company | | |
| | | | |
| | 101 Alton Road | <u>d</u> | |
| | Address | | |
| | Minusi Danah El O | 0400 | |
| | Miami Beach, FL 33 City/State and Zip Co | 3139 ode | |
| | | | |
| E-mail address: (t | o be used for future an | mual report notification) | |
| | | , | |
| For further information concerning this | matter, please call: | | |
| - | • | | |
| Gerardo Palacios Name of Contact Persor | at (| 305 308-4300 rea Code & Daytime Telephone Numb | er |
| | | | |
| Enclosed is a \$35.00 check made payab | le to the Department of | State. | |
| | | | |
| <u>Mailing Addre</u> Amendment S | ss: ection | Street Address: Amendment Section | |
| Division of C | | Division of Corporations | |
| P.O. Box 632 | | Clifton Building | |
| Tallahassee, F | L 32314 | 2661 Executive Center Circle | |
| | | Tallahassee, FL 32301 | |

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 nge is submitted for a corporation organized under the laws of the State of Florida |
|--|---|
| in orde | r to change its registered office or registered agent, or both, in the State of Florida. |
| | he corporation: The Courts at South Beach Condominium Association, Inc. |
| 2. The principal | office address: 101 ALton Road, Miami Beach, FL 33130.* |
| 3. The mailing a | ddress (if different): |
| 4. Date of incom | poration/qualification: 6/12/1995 Document number: <u>N95000028</u> |
| | street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned) |
| | Mark D. McWilliams |
| | 4600 N Ocean Drive, #206 |
| | Boynton Beach, FL 33435 |
| 6. The name and (if changed): | street address of the new registered agent (if changed) and /or registered office |
| | BROUGH, CHADROW & LEVINE, P.A. |
| | 1900 NORTH COMMERCE PARKWAY |
| | P.O Box NOT acceptable |
| | WESTON, FL 33326 |
| The street address changed will | ss of its registered office and the street address of the business office of its registered agent, be identical. |
| Such change was authorized by the | is authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change. |
| Signation | Paula Allen Vice President Footen or typed name and title |
| I further agree to of my duties, and document is bei | the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change. |
| Sign | nature of Degistered Agent Date |
| If signing on be | half of an entity: |
| | David L. Brough |

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

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