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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Prince Michael Condominium Association, Inc.

Name of Corporation

N9600003882

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:

Juan C. Zorrilla, Esq.

Name of Contact Person

Firm/Company

1825 Ponce de Leon Blvd., Suite 517

Address

Coral Gables, FL 33134

City/State and Zip Code

jcz@zgolaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan C. Zorrilla, Esq.

.786 \208-6124

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ange is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of	Florida
1. The name of	the corporation: Prince Michael Condominium Association	ı, Inc.
2. The principal	l office address: 2618 Collins Avenue, Miami Beach, FL 3	3140
3. The mailing a	address (if different): P.O. Box 440584, Miami, FL 33144	
4. Date of incor	poration/qualification: 7/24/1996 Document number: N960	00003882
	d street address of the current registered agent and registered office on file wartment of State: (If resigned, enter resigned)	vith the
	Zorrilla, Juan C	_
	1401 Brickell Avenue, Ste 570	
	Miami, FL 33131	- - 3
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered o	AUG 21
	Juan C. Zorrilla, Esq.	in the second of
	1825 Ponce de Leon Blvd., Suite 517	9: 0
	P.O. Box NOT acceptable	
	Coral Gables, FL 33134	_
The street addr as changed will	ess of its registered office and the street address of the business office of i l be identical.	ts registered agent,
Such change wauthorized by the	as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.	officer so
Signatu	Rolando Barrero, Pres Printed or typed name and to	
I further agree performance of agent. Or, if the hereby confirm	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 confine the delivers, and I am familiar with and accept the obligation of my position has being filed merely to reflect a change in the registered official that the combination has been notified in writing of this change. The property of Registry (Agent Day 2) The property of an entity:	mplete n as registered ice address, I
	Typed or Printed Name	

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