NATOCOCIUL

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	}
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



500285523265

. 05/10/16--01025--018 **35.00



RD/Ch8

MAY 1 1 2016 I ALBRITTON

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 <mark>Florida</mark> to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation; CAPTIVA CONDOMINIUM B ASSOCIATION, INC.
2. The principal	office address: Solutions Property Management Group, Inc. 79th Ave Doral, FL 33122
	Address (if different): Solutions Property Management Group, Inc. N 79th Ave Doral, FL 33122
4. Date of incorp	poration/qualification: 12/24/1997 Document number: N97000007166
5. The name and	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	MICHAEL A. HALBERG, ESQ.
	10800 BISCAYNE BLVD. SUITE 988
	MIAMI, FL 33161
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
•	MICHAEL A. HALBERG, ESQ.
	1391 SAWGRASS CORPORATE PARKWAY
	1391 SAWGRASS CORPORATE PARKWAY P.O. Box NOT acceptable FT. LAUDERDALE, FL 33323
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Signatur	Colemnan Enrique Alaman. Se cre Tary
I hereby accept I further agree to performance of agent. Or, if this hereby confirm t	the appointment as registered agent and agree to act in this capacity, a comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
MH	albuf 11/9/2015
	nature of Registered Agent Date
If signing on hel	nall of an entity:
- Ty	ped or Printed Name

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