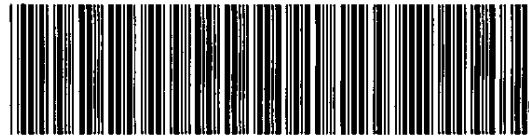


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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 AUG 19 PM 2:55

R.A. Charge
C.COULLETTE

AUG 19 2010

EXAMINER

(Return to Filing Office)
PHONE (PLEASE PRINT) 305 467 7697
Celebrity Point Condo Assoc
15969 NW 64 Ave Office Box
MIAMI LAKES FL 33014

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

**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 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Celebrity Point Condominium Association
2. The principal office address: 15969 NW 64 Ave Office Box
Miami Lakes, FL 33014
3. The mailing address (if different): (Same)

4. Date of incorporation/qualification: 2000 Document number: N98000003451

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Resigned

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

YUDANY FERNANDEZ

5801 NW 151 Street Suite 305
P.O. Box NOT acceptable
Miami Lakes FL 33014

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Kurtis Schweizer
Signature of an officer or director

Kurtis Schweizer, President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

8-13-10
Date

If signing on behalf of an entity:

YUDANY FERNANDEZ
Typed or Printed Name

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

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

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SECRETARY OF CORPORATIONS
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