## N98000004077

(Re	equestor's Name)				
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77 10-11-11



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

September 20, 2011

CONTINENTAL 2950 N. 28TH TERRACE HOLLYWOOD, FL 33020

SUBJECT: SIERRA RIDGE CONDOMINIUM K ASSOCIATION, INC.

Ref. Number: N98000004077

We have received your document for SIERRA RIDGE CONDOMINIUM K ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Letter Number: 711A00021766

Tina Roberts Regulatory Specialist II

www.sunbiz.org

## STATEMENT OF CHANGE OF REGISTERED OF ICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a co	rporation organized	507.1508, or 617.1508, Floi I under the laws of the State I agent, or both, in the State	<sub>e of</sub> FLORIDA		
			DOMINIUM K ASSOC			
			IUE, NORTH MIAMI E			
3. The mailing a	ddress (if different):					
4. Date of incorp	poration/qualification:	07/14/1998	Document number:	N98000004077		
	I street address of the current of State: (If resigned)		t and registered office on fi	le with the		
	KATZMAN GARFINKEL & BERGER					
	5297 W. COPANS ROAD					
	MARGATE, FL 330	063		200 3		
6. The name and (if changed):			f changed) and /or registere	ed office		
	110 SE 6TH STRE FORT LAUDERDA	ET, 15TH FLOC	DR .	— Paragrafia		
The street addre	ess of its registered office be identical.	e and the street add	dress of the business office	e of its registered agent,		
			y its board of directors or led in writing of the change			
Kene	Moh Pres	\/	RENA MOHAMME	D, PRESIDENT		
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as regito comply with the provid I am familiar with and filed merely to reflect been notified in writing	stered agent and a sions of all statute: I accept the obliga t a change in the re t of this change.	gree to act in this capacity s relative to the proper an tion of my position as reging egistered office address, T	v. d complete performance stered agent. Or, if this hereby confirm that the		
√ XVQ	nature of Registered Agent	Lau _	Date	<u>/</u>		
If signing on be	half of an entity:					
	yped or Printed Name	<del></del>				

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