N9900001610

(Re	equestor's Name))
(Ac	ddress)	
(Ad	ddress)	
(C	ity/State/Zip/Phon	ne #)
PICK-UP	WAIT	MAIL
. (Br	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	Certificate	s of Status
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COVER LETTER

Enclosed is a \$35.00 check made payable to the Department of State.

For further information concerning this matter, please call:

Michael Bakalar, Administrator
Name of Contact Person

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

954) 475-4244, ext 107 Area Code & Daytime Telephone Number

TO:

Amendment Section Division of Corporations

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, ange is submitted for a corporation organized under the laws of the State of Florida	
	der to change its registered office or registered agent, or both, in the State of Florida.	
	f the corporation Show Homes AT NAVING Since Family NEW BOW	nach Association, The
2. The principal	al office address: 3691 SW 164th Avenue, Miramar, FI 33027	
3. The mailing ac	address (if different): Same	
4. Date of incorp	prporation/qualification: 3/15/1999 Document number: N99000	001610
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Irvin W. Nachman, PA	<u>ြ</u> န္
	4441 Stirling Road	9 AUG
	Ft. Lauderdale, Fl 33314	
6. The name and (if changed):	and street address of the new registered agent (if changed) and /or registered office	FR I: C
	Bakalar & Associates, P.A.	ਜੋ ਨੇ
	150 South Pine Island Road, Suite 540	
	P.O. Box NOT acceptable	
	Plantation, FI 33324	
The street addre as changed will	lress of its registered office and the street address of the business office of its registerial be identical.	ered agent,
Such change wa authorized by th	was authorized by resolution duly adopted by its board of directors or by an officer the board, or the corporation has been notified in writing of the change.	so
	RICHARD DUINBUE Printed or typed name and title	
I further agree i of my duties, an document is bei	ot the appointment as registered agent and agree to act in this capacity. The to comply with the provisions of all statutes relative to the proper and complete pand I am familiar with and accept the obligation of my position as registered agent, eing filed merely to reflect a change in the registered office address, I hereby confinate been notified in writing of this change.	erformance . Or, if this rm that the
N. WO	Signature of Registered Agent Date	
If signing on be	behalf of an entity:	
***************************************	alar & Associates, P.A. Typed or Printed Name	
	* * * FILING FFF: \$35.00 * * *	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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