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TRANSMITTAL LETTER

Division of Corporations			
SUBJECT: Oriole at Stonecrest,	Inc. (Name of corporation)		
DOCUMENT NUMBER: P95000052466)		9
The enclosed Statement of Change of Register	red Office/Agent and fee a	ere submitted for filing.	三年 書
Please return all correspondence concerning the	his matter to the following	;	03 NOV 26 PM 1: 55
Harry Levy	y		器 里
	(Name of person)		
Oriole Hor	mes Corp		ORIGINAL SS
	(Name of firm/company)		
6400 Cong	ress Ave. Suite 20	00	
	(Address)		· · · · · · · · · · · · · · · · · · ·
Boca Rator	n, FL 33487	,	
	(City/state and zip code)		
For further information concerning this matter	r, please call:		
Susan Spragg	at (61 999–186	
(Name of person)		Area code & daytime to	elephone number)
Enclosed is a \$35.00 check made payable to the	he Department of State.		
Mailing Address:		Street Address:	
Amendment Section Division of Corporations		Amendment Section	ne.
P.O. Box 6327 Tallahassee, FL 32314		Division of Corporation 409 E. Gaines Street Tallahassee, FL 3239	9

CR2E045(09/03)

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

•	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this	_
•	tted for a corporation organized under the laws of the State of Florida ristered office or registered agent, or both, in the State of Florida.	in order
_		
1. The name of t	he corporation: Oriole at Stonecrest, Inc.	
2. The principal		
	Boca Raton, FL 33487	_
3. The mailing a	ddress (if different):	
	<u>and the second of the second </u>	·
4. Date of incorp	poration/qualification: 7/7/95 Document number: P95000052466	
	street address of the current registered agent and registered office on file with the tment of State:	
	Joseph Pivinski	
	c/o Oriole Homes Corp., 6400 Congress Ave., Suite 2000	
	Boca Raton, FL 33487	2 03
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	FILE FILE
•	Harry Levy	能是日
•	6400 Congress Ave., Suite 2000	55
	(P.O. Box or personal mailbox NOT acceptable) Boca Raton, FL 33487	RIPA
The street addre	ess of its registered office and the street address of the business office of its registered identical.	agent, as
Such change wa	is authorized by resolution duly adopted by its board of directors or by an officer so a corporation has been notified in writing of the change.	uthorized by
Mark	Later of hear Mark LEVY () <u>CESTOE</u> NT
I hereby accept I further agree t duties and I am being filed mere been nothied for	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performantial familiar with and accept the obligation of my position as registered agent. Or, if this is to reflect a change in the registered office address, I hereby confirm that the corporation of this change.	rmance of my s document is rration has
(Van	(Signature of Registered Agent) (Date)	
If signing on be	half of an entity:	
	(Typed or Printed Name) (Consoir)	

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