

P96000052969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

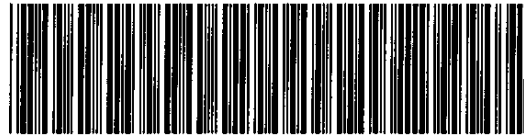
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09/05/07--01006--017 **10.00

07/25/07--01034--026 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 SEP -4 PM 1:19



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2007

MARTIN P. HEISE
SHOPPES OF BLUE LAKE I, INC.
2200 NW 1 AVENUE - SUITE 220
BOCA RATON, FL 33431

SUBJECT: SHOPPES OF BLUE LAKE I, INC.
Ref. Number: P96000052969

We have received your document for SHOPPES OF BLUE LAKE I, 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 707A00050000

RECEIVED
2007 SEP -4 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2007

MARTIN P. HEISE
SHOPPES OF BLUE LAKE I, INC.
2200 NW 2 AVENUE - SUITE 220
BOCA RATON, FL 33431

SUBJECT: SHOPPES OF BLUE LAKE I, INC.
Ref. Number: P96000052969

We have received your document for SHOPPES OF BLUE LAKE I, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The fee to file your document is \$35.

There is a balance due of \$10.00.

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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 607A00047565

2901- update address
029-7201
7102

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07 AUG 16 AM 8:00
DIVISION OF CORPORATIONS

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Shoppes of Blue Lake I, Inc
2. The principal office address: 2200 NW 2 Ave, Suite 220
Boca Raton, FL 33431
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 6/20/1996 Document number: P96000052969

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Martin P. Heise
947 Clint Moore Rd
Boca Raton, FL 33487

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

Martin P. Heise
2200 NW 2 Ave, Suite 220
(P.O. Box NOT acceptable)
Boca Raton, FL 33431

FILED STATIONS
SECRETARY OF CORPORATIONS
01 SEP -4 PM 1:19

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 for the corporation has been notified in writing of the change.

Martin P. Heise
(Signature of an officer or director)

Martin P. Heise
(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.

Martin P. Heise
(Signature of Registered Agent)

August 7, 2007
(Date)

If signing on behalf of an entity:

Martin P. Heise
(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)