

Division of Corporations

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Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 617-6380

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Account Number : I20040000146  
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## REGISTERED AGENT CHANGE

AVENTURA/TOWN SQUARE, INC.

Certificate of Status	0
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Aventura/Town Square, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P97000099293

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel B. Nunn, Jr., Attorney  
Name of Contact Person

Fowler White Boggs P.A.  
Firm/Company

50 N. Laura Street, Suite 2800  
Address

Jacksonville, FL 32202  
City/State and Zip Code

daniel.nunn@fowlerwhite.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel B. Nunn, Jr., Attorney at ( 904 ) 598-3118  
Name of Contact Person Area Code & Daytime Telephone Number

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

**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

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# 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: Aventura/Town Square, Inc.
2. The principal office address: 9995 Gate Parkway N., Suite 400, Jacksonville, FL 32246
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 11/13/1997 Document number: P97000099293
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)

Dennis A. Foster

9995 Gate Parkway N., Suite 400

Jacksonville, FL 32246

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

Daniel B. Nunn, Jr.

50 N. Laura Street, Suite 2800

P.O. Box NOT acceptable

Jacksonville, FL 32202

FILED  
 09 OCT 23 AM 11:23  
 SECRETARY OF STATE  
 TALLAHASSEE, FL 32399

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.

[Signature]  
 Signature of an officer or director

Nick T. Kavalieros, 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

10/12/2009  
 Date

If signing on behalf of an entity:

\_\_\_\_\_  
 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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