P9900060436

(Requestor's Name)		
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(Address)		
(Address)		
(City/State/Zip/Phone #)		
(City/State/Zip/Prione #)		
PICK-UP WAIT MAIL		
_ _ _		
(Business Entity Name)		
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(Document Number)		
Certified Copies Certificates of Status		
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Office Use Only



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COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJECT: Marina at Marina Bay, Inc.			
	(Name of Co	rporation)	
DOCU	MENT NUMBER: P99000060436		
The en	closed Statement of Change of Registered Office	Agent and fee are submitted for filing.	
Please	return all correspondence concerning this matter	to the following:	
		C	
	Jack Taplin		
	(Name of Con	tact Person)	
Marina at Marina Bay, Inc. (Firm/Company)			
(Firm/Company)			
13651 NW 4th Street			
	(Addr	ess)	
		•	
	Pembroke Pines, FL 33028	17'- ()	
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Jack 1	Taplin	at (954) 437-1435	
	(Name of Contact Person)	at (954) 437-1435 (Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of State.			
	Mailing Address:	Street Address:	
	Amendment Section Division of Corporations	Amendment Section Division of Corporations	
	P.O. Box 6327	Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle	
	•	Tallahassee, FL 32301	

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

statement of change	visions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this e is submitted for a corporation organized under the laws of the State of Florida ochange its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	corporation: Marina at Marina Bay, Inc.	
2. The principal off	ice address: 13651 NW 4th Street, Pembroke Pines, FL 33028	
3. The mailing addr	ress (if different): Same	
4. Date of incorpora	ation/qualification: 07/06/1999 Document number: P99000060436	
5. The name and str Florida Departme	reet address of the current registered agent and registered office on file with the ent of State:	
Sa	arah Ward	
13	3651 NW 4th Street	
Pe	embroke Pines, FL 33028	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
<u>R</u>	obert Montaperto	
<u>13</u>	3651 NW 4th Street	
D	(P.O. Box NOT acceptable) embroke Pines, FL 33028	
The street address as changed will be	of its registered office and the street address of the business office of its registered agent, identical.	
Such change was a authorized by the b	nuthorized by resolution duly adopted by its board of directors or by an officer so poard, or the corporation has been notified in writing of the change.	
(Signature o	Jack Taplin, President (Printed or typed name and title)	
Thereby accept the I further agree to c of my duties, and I document is being corporation has be	appointment of registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performance am familiar with and accept the obligation of my position as registered agent. Or, if this filed merely to reflect a change in the registered office address, I hereby confirm that the even notified in writing of this change.	
NI	6/17/08	
(Signation of Signation of Sign	(Date)	
Robent	·	

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