

719055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

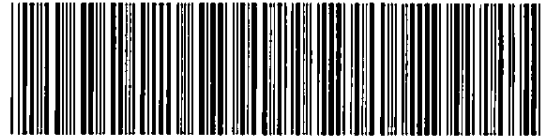
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fairways Riviera Association, Inc.  
Name of Corporation: \_\_\_\_\_

**DOCUMENT NUMBER:** 719055  
\_\_\_\_\_

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:

Lisa Lerner  
Name of Contact Person  
SKRLD, Inc.  
Firm/Company  
201 Alhambra Circle, 11th floor  
Address  
Coral Gables, Florida 33134  
City/State and Zip Code  
fairwayspm@akam.com  
E-mail address: (to be used for future annual report notification)

2011 JUN 23 02

For further information concerning this matter, please call:

Justin Hill at ( 954 ) 457 8348  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Fairways Riviera Association, Inc.
2. The principal office address: 250 Diplomat Parkway,  
Hallandale, FL 33009
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/25/1970 Document number: 719055
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)

AR Law Group PLLC  
8785 SW 165th street, Suite 103  
Miami, FL 33193

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

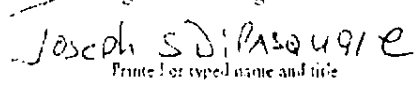
SKRLLD, Inc.  
201 Alhambra Circle, 11th floor  
Coral Gables, Florida 33134

FILED JUN 26 2024

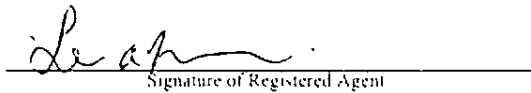
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

  
\_\_\_\_\_  
Print or typed name and title

  
\_\_\_\_\_  
Print or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, 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 of Registered Agent

6/26/24  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Lisa A. Lerner  
\_\_\_\_\_  
Typed or Printed Name

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