

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 743949

**FILED**  
**Dec 21, 2011**  
**Secretary of State**

**Entity Name:** THE GARDENS OF KENDALL CONDOMINIUM NO. 1, ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O M&E ASSOCIATES OF MIAMI, INC.  
13055 SW 42ND STREET, SUITE 203  
MIAMI, FL 33175

**New Principal Place of Business:**

C/O ATLAS PROPERTY MANAGEMENT SVCS, INC.  
1450 NW 87TH AVENUE , STE # 204  
MIAMI, FL 33172

**Current Mailing Address:**

C/O M&E ASSOCIATES OF MIAMI, INC.  
13055 SW 42ND STREET, SUITE 203  
MIAMI, FL 33175

**New Mailing Address:**

C/O ATLAS PROPERTY MANAGEMENT SVCS, INC.  
1450 NW 87TH AVENUE , STE # 204  
MIAMI, FL 33172

**FEI Number:** 59-1843562

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SIEGFRIED RIVERA LERNER  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

DENNIS EISINGER  
4000 HOLLYWOOD BLVD  
SUITE #265  
HOLLYWOOD, FL 33021 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DENNIS EISINGER

12/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GUTHRIE, IAN  
Address: 10425 SW 112 AVENUE, UNIT # 116  
City-St-Zip: MIAMI, FL 33176

Title: T  
Name: LEON, ALEXANDRA  
Address: 10525 SW 112 AVENUE, UNIT # 318  
City-St-Zip: MIAMI, FL 33176

Title: SEC  
Name: ALFONSO, JORGE  
Address: 8821 SW 105 STREET  
City-St-Zip: MIAMI, FL 33176

Title: VP  
Name: HALLGREN, EVA  
Address: 10425 SW 112 AVENUE # 323  
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: IAN GUTHRIE

PD

12/21/2011

Electronic Signature of Signing Officer or Director

Date