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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144 : (305)520-2344 Phone

Fax Number : (305)520-2400 & TALLENT

NOV 1 9 2018

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## REGISTERED AGENT CHANGE CODINA CONSTRUCTION CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Codina Construction C	orporation
DOCUMENT NUMBER: M90693	Oranon
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Jessica Perez	
Name of Conta	ct Person
Fim(Com	•
117 NE 1st Avenue	•
Addres	S
Miami, FL 33132	
City/State and	Zip Code
kolleen.cobb@feci.c	com
E-mail address: (to be used for futt	are annual report notification)
For further information concerning this matter, please cal	11:
Jessica Perez	at (305 )520-2366 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departm	ent of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahanna FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32314	ZOOT EXECUTIVE CEITEL CITCLE

Tallahassee, FL 32301

CR2E045 (03/12)

## 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.
J. The name of the corporation: Codina Construction Corporation
2. The principal office address: 117 NE 1st Avenue, 11th Floor, Miami, FL 33132
3. The mailing address (if different):
4. Date of incorporation/qualification: 7/25/1988 Document number: M90693
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)
Kolleen O.P. Cobb
2855 LeJeune Road, 4th Floor
Coral Gables, FL 33134
6. The name and street address of the new registered agent (if changed) and for registered office (if changed):
Kolleen O.P. Cobb
TT NE 1st Avenue, Truttion
P.O. Box NOT acceptable  Miami, FL 33132
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.
Juan Godoy, Vice President    Signature of an officer or affector   France or typed name and title
I hereby accept the appointmist 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 of Registered Agent Date
If signing on behalf of an entity:
Kolleen O.P. Cobb Typed or Printed Name

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