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Adam Cervera Shareholder

Phone: 305.351.1075 Fax: 305.442.2232

acervera@beckerlawyers.com

Becker & Poliakoff 121 Alhambra Plaza 10th Floor Coral Gables, FL 33134



July 24, 2020

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Salzedo in the Gables Condominium Association, Inc.

Document No. N03000009264

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office/Agent form along with Check #2923 in the amount of \$35.00 made payable to the Florida Department of State to cover the cost of filing.

Should you have any questions, please do not hesitate to contact me. Thank you.

Sincerely.

Adam Cervera For the Firm

AC/lh

Enclosures

ce: Salzedo in the Gables Condominium Association, Inc.

c/o Board of Directors

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

. . . .

statement of cha	te provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S hange is submitted for a corporation organized under the laws of the State of $\frac{1}{2}$ der to change its registered office or registered agent, or both, in the State of F	Florida		
1 The name of	of the corporation: Salzedo in the Gables Condominium Association, Inc.			
	al office address: 1014 Salzedo St Coral Gables, FL 33134			
3. The mailing a	g address (if different): 1000 5th Street #218 Miami Beach, FL 33139			
	prporation/qualification: 10/23/2003 Document number: N0300000	9264		
	nd street address of the current registered agent and registered office on file wit partment of State: (If resigned, enter resigned)			
	Miami Powerhouse Management			
	1000 5th Street #218			
	Miami Beach, FL 33139	24 233 233	2020 .	
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered of	RETARY	1020 JUL 27	
	Becker & Poliakoff, P.A.	주 주 주	3	
	121 Alhambra Plaza, 10th Floor	TST	PM 12: 40	_
	P.O. Box NOT acceptable Coral Gables, FL 33134	- E	5	
The street addre	ress of its registered office and the street address of the business office of its lbe identical.	regist	ered ag	ent,
Such change wa authorized by the Signatur	was authorized by resolution duly adopted by its board of directors or by an of the board, or the dorporation has been notified in writing of the change. Thinked or typed name and till	officer	so	_
I hereby accept I further agree to of my duties, and document is beil corporation has	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and compand I am familiar with and accept the obligation of my position as registered eing filed merely to reflect a change in the registered office address, I hereby as been notified in writing of this change.	plete p agent confi	erform Or, if rm thái	ance this the
	07/24/2020			
Sign	ignature of Registered Agent Date			
If signing on be	chalf of an entity:			
	am Cervera, Esq.			
13	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 (04/13)