

NO7000002346

Ten Museum Park Master Assn.
(Requestor's Name)

2950 N 28th Terr
(Address)

Hollywood FL 33020
(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

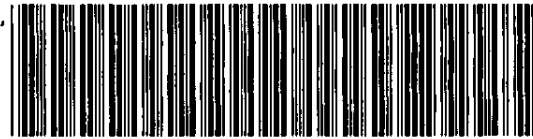
(Business Entity Name)

(Document Number)

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JAN 31 2013

R. WHITE

R/A Change

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2013

TEN MUSEUM PARK MASTER ASSOCIATION INC
C/O THE CONTINENTAL GROUP INC
2950 NE 28TH TERR
HOLLYWOOD, FL 33020 US

SUBJECT: TEN MUSEUM PARK MASTER ASSOCIATION, INC.
Ref. Number: N07000002346

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

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

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Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6820.

Rebekah White
Regulatory Specialist

Letter Number: 513A00000913

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TALLAHASSEE, FLORIDA



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Rebekah White
Regulatory Specialist

Letter Number: 513A00000913

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ten Museum Park Master Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N07000002346

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:

Daniel Sharon

Name of Contact Person

Ten Museum Park Master Association, Inc.

Firm/Company

1040 Biscayne Blvd.

Address

Miami, FL 33141

City/State and Zip Code

cam@tenmuseumpark.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 JAN 30 PM 4:54

FILED

For further information concerning this matter, please call:

Daniel Sharon

Name of Contact Person

at (305) 358-8631

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: Ten Museum Park Master Association, Inc.
2. The principal office address: 1040 Biscayne Blvd
Miami, FL 33132
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 03/06/07 Document number: N07000002346

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)

BLAXBERG, GRAYSON, KUKOFF & TWOMBLY P.A.
25 SE 2ND AVENUE SUITE 730
MIAMI, FL 33131

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

GURSKY RAGAN, P.A.
14 NE 1ST AVENUE, SECOND FLOOR
P.O. Box NOT acceptable
MIAMI, FL 33132

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TALLAHASSEE, FLORIDA

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.

[Signature]
Signature of an officer or director

K. JENDER
Printed or typed name and title

I hereby accept the appointment 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]
Signature of Registered Agent

12/21/2012
Date

If signing on behalf of an entity:

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 (03/12)