

N96000001178

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000268524 3)))



H160002685243ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : CUEVAS & GARCIA, P.A.
Account Number : T20030000123
Phone : (305) 461-9500
Fax Number : (305) 448-7300

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

Email Address: accounting@cuevasku.com

**REGISTERED AGENT CHANGE
DORAL LANDINGS TOWNHOMES ASSOCIATION, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED

16 NOV - 1 PM 2:37

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 NOV - 1 AM 9:52

NOV - 2 2016

C LEWIS

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DORAL LANDINGS TOWNHOMES ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N96000001178

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:

Andrew Cuevas, Esq

Name of Contact Person

Cuevas & Garcia, P.A.

Firm/Company

7480 SW 40 Street, Suite 600

Address

Miami, FL 33155

City/State and Zip Code

accounting@cuevaslaw.com

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

For further information concerning this matter, please call:

Edith Taylor/Kathy Ramos at **305 461-9500**
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
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: DORAL LANDINGS TOWNHOMES ASSOCIATION, INC.

2. The principal office address: 6925 NW 42 STREET MIAMI, FL 33166

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 03/01/1996 Document number: N96000001178

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)

THE MELONI LAW FIRM

840 SW 40th AVENUE

PLANTATION, FL 33317

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

Cuevas & Garcia, P.A.

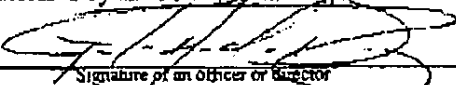
7480 SW 40th Street, Suite 600

P.O. Box NOT acceptable

Miami, FL 33155

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

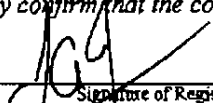
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Gustavo Diaz - President

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 of Registered Agent

11/01/2016
Date

If signing on behalf of an entity:

Jose A. Torrec
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 NOV - 1 AM 9:52