

350529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 8, 2013

SYLVIE GENEST
LAUDERHILL TEN MANAGEMENT CORPORATION
4301 NW 16TH STREET
LAUDERHILL, FL 33313

SUBJECT: LAUDERHILL TEN MANAGEMENT CORPORATION, INC.
Ref. Number: 350529

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6050.

Darlene Connell
Regulatory Specialist II

Letter Number: 413A00000441

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LAUDERHILL TEN MGT. CORP.

Name of Corporation

DOCUMENT NUMBER: 350529

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:

SYLVIE GENEST

Name of Contact Person

LAUDERHILL TEN MGT.CORP

Firm/Company

4301 N.W. 16th STREET

Address

LAUDERHILL , FLORIDA

City/State and Zip Code

LAUDERHILL10@COMCAST.NET

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

For further information concerning this matter, please call:

SYLVIE GENEST

Name of Contact Person

at (**954**) **733-1922**

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: LAUDERHILL TEN MANAGEMENT CORPORATION, INC.

2. The principal office address: 4301 N.W. 16th STREET
LAUDERHILL, FLORIDA 33313

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/08/1969 Document number: 350529

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)

JACQUES RACETTE

4301 NW 16TH STREET

LAUDERHILL, FL 33313

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

SYLVIE GENEST

4301 N.W. 16th STREET

P.O. Box NOT acceptable

LAUDERHILL, FLORIDA 33313

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

WILFRED MCGRAW
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

11/27/2010
Date

If signing on behalf of an entity:

SYLVIE GENEST
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