710864

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Amendment Section Division of Corporations

TO:

SUBJECT: FIRST HORIZONS CONDOMINIUM, INC.
Name of Corporation

DOCUMENT NUMBER: 710864

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:

William G. Essig
Name of Contact Person
Essig Law, P.A.
Firm/Company
10691 N. Kendail Drive, Suite 206
Address
Miami, Florida 33176

For further information concerning this matter, please call:

wessig@essiglawpa.com
E-mail address: (to be used for future annual report notification)

Anthony J. Cipolla

Name of Contact Person at (786) 422-4600

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

Amendment Section
Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	inge is submitte	d for a corporation or	0502, 607.1508, or 617.1508, ganized under the laws of the gistered agent, or both, in the l	State of Flo	orida		
	-	First Horizons Conde	-	,			
2. The principal		1550 Northeast 191 S	t., N. Miami Beach, FL 33179				
3. The mailing a	ddress (if differ	ent): 1550 Northeast	191 St., Mailbox of the Associat	tion, N. Miar	ni Beach,	FL 331	
		cation: May 10, 1966	Document number:	710044			
5. The name and	d street address		ed agent and registered office (igned)	on file with	the		
	SKRLD, Inc.						
	201 Alhambra Circle, Suite 1102				SE	202	
	Coral Gables, F	Florida 33134			CRE		
6. The name and (if changed):	l street address	agent (if changed) and /or regi	stered office	TARY OAHASS	2020 JUL 27 PH 12: 43		
	William G. Ess	ig, Esq.			E.S.	15. 15.	Ţ
	Essig Law, P.A				FE	ည်	
P.O. Box NOT acceptable							
	10691 N. Kend	all Drive, Suite 206, M	iami, Florida 33176				
The street addre	ess of its registe be identical.	ered office and the str	reet address of the business of	ffice of its re	egistered	agent.	
Such change wa authorized by th	as authorized by ne board, or the	y resolution duly ado corporation has been	pted by its board of directors i notified in writing of the cha	or by an off ange.	ficer so		
Natac	lu henn	(MAN)	Natacha Desamours - Tre	easurer			
	re of an officer or di		Printed or typed				
of my diddes an	d f am tamiliai	really and accept the	t and agree to act in this capa statutes relative to the proper obligation of my position as in In the registered office address nge.	revistered a	gent. Or	: II lins	
U	777N/		July 15, 2020				
Sig	nature of Registered	Agent	Date	•			
If signing on be	half of an entit	y: ()					
William G. Essig	; <u> </u>						
T	yped or Printed Nam	ic					

* * * 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)