722409

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| PICK-UP WAIT MAIL | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Los Prados Condominium No. 1, Inc.

Name of Corporation

DOCUMENT NUMBER: 722409

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:

Patricia A. Mallard Name of Contact Person Duval Realty, Inc. Firm/Company 2980 Hartley Road, Suite 2 Address Jacksonville, FL 32257 City/State and Zip Code Pat@DuvalRealtyInc.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia A. Mallard

Name of Contact Person

at (904) 367-1818

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

| | | 2, 617.0502, 607.1508, or 617.1508, Fla tion organized under the laws of the Sta | |
|--|---|---|------------------------------------|
| in ord | ler to change its registered offic | e or registered agent, or both, in the Sta | te of Florida. |
| 1. The name of | the corporation: Los Prado | s Condominium No. 1, Inc. | |
| | d office address: 2980 Hartl wille, FL 32257 | | |
| | | | |
| 4. Date of incom | rporation/qualification: 01/10 | 0/1972 Document number: 72 | 2409 |
| | nd street address of the current re ortment of State: (If resigned, en | egistered agent and registered office on iter resigned) | file with the |
| | Leland Management | , Inc. | |
| | 6972 Lake Gloria Blv | ⁄d. | 7019. |
| | Orlando, FL 32809 | | SECHE JULI 19 |
| 6. The name an (if changed): | | stered agent (if changed) and /or register | |
| | Duval Realty, Inc. | | 》 三 三 |
| | 2980 Hartley Road, S | Suite 2 | 1 |
| | Jacksonville, FL 322 | O. Box NOT acceptable | |
| The street addr | | the street address of the business office | e of its registered agent |
| | | | |
| authorized by t | ras authorized by resolution dul he hoard, or the corporation ha | ly adopted by its board of directors or be is been notified in writing of the change | y an officer so E. |
| | | Ernest Riedl | P |
| I hereby accept I further agree performance of agent:—Os, if th | to comply with the provisions of my duties and I am familiar was us document is being filed mer | Printed or typed name I agent and agree to act in this capacity of all statutes relative to the proper an with and accept the obligation of my po ely to reflect a change in the registerea notified in writing of this change. | d complete sition as registered |
| M | ALLAMA gnature of Registered Agenti | June 14, 2019 | |
| If signing on be | ehalf of an entity: | | |
| Patricia A. | • | | |
| T | Typed or Printed Name | | |

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

* * * FILING FEE: \$35,00 * * *