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DIVISION OF CORPORATIONS

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R.A. Change C.COULLIETTE

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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Gateway Estates Park Condominiu Name of Corporation	m Association, Inc.
DOCUMENT NUMBER: 784765	
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.
Please return all correspondence concerning this matter to the fe	ollowing:
Grace Connors, LC Name of Contact Per	
Gateway Estates Park Condominio	um Association, Inc.
Firm/Company	
35250 SW 177th Court, Unit: Ma	anagement Office
/ radioss	
Florida City, FL 33 City/State and Zip Co	034 ode
gatewayestatesoffice@ya	Rhoo com
E-mail address: (to be used for future an	
For further information concerning this matter, please call:	
Grace Connors, LCAM at (305) 247-8500 rea Code & Daytime Telephone Number
Name of Contact Person A	rea 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	Street Address: Amendment Section Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: Gateway Estates Park Condominium Association, Inc. office address: 35250 SW 177th Court, Unit: Management Office, Florida City, FL 3
	address (if different): Gateway Estates Park Condominium Association, Inc.
35250 S	W 177 Court, Unit: Management Office, Florida City, FL 33034
4. Date of incorp	poration/qualification: January 6, 1976 Document number:
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Terminated
6. The name and (if changed):	Street address of the new registered agent (if changed) and /or registered office Grace Connors, LCAM Gateway Estates Park Condominium Association, Inc. P.O. Box NOT acceptable 35250 SW 177th Court, Unit: Management Office, Florida City, Fl 33034
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatu	Joyce Ann Knight, President re of an officer or director Printed or typed name and title
I harabu aaaant	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the specifical in writing of this change.
Gi	November 18, 2010
Sig	nature of Registered Agent Date
If signing on be	chalf of an entity:
Т	Grace Connors yped or Printed Name

* * * FILING FEE: \$35.00 * * *