

744420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

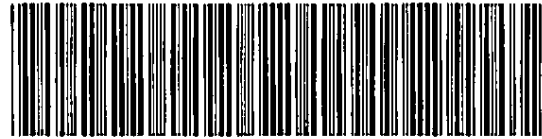
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

JSQ 09/23/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THE CROSSINGS TOWN VILLAS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: 744420

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:

Yamil Cabrera

Name of Contact Person

THE CROSSINGS TOWN VILLAS ASSOCIATION, INC.

Firm/Company

11578 SW 132 AVE

Address

Miami, FL 33186

City/State and Zip Code

ycabrera@crossingshoa.com

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

For further information concerning this matter, please call:

Yamil Cabrera

Name of Contact Person

at (305)

387-0436

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: THE CROSSINGS TOWN VILLAS ASSOCIATION, INC.
2. The principal office address: 11578 SW 132 AVE MIAMI, FL 33186
3. The mailing address (if different): n/a
4. Date of incorporation/qualification: 09/28/1978 Document number: 744420
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)

GOODMAN-GUENTHER, JOYCE

10723 SW 104 STREET

MIAMI, FL 33176

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

IGLESIAS LAW GROUP P.A.

15800 PINES BOULEVARD SUITE 303

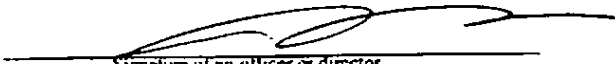
P.O. Box NOT acceptable

PEMBROKE PINES, FL 33027

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2020 JUL 31 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FL

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.

 JAMES MORGAN, PRESIDENT
Signature of an officer or director 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.

 7/9/2020
Signature of Registered Agent Date

If signing on behalf of an entity:

David Iglesias

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 (04/13)