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(Requestor's Name) (Address) (Address)	300431124883
(City/State/Zip/Phone #)	06/06/2401021003 * * 35.00
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COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT: Monterey Condominium Motel Association, Inc. Name of Corporation

DOCUMENT NUMBER: 748924

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:

Donna Damonte

Name of Contact Person

Jonathan James Damonte, Chartered

Firm/Company

12110 Seminole Blvd

Address

Largo, FL 33778

City/State and Zip Code

ddamonte@damontelaw.com

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

For further information concerning this matter, please call:

 Donna Damonte
 at (727)
 586-2889

 Name of Contact Person
 Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> 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

CR2E045 (04/13)

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: Monterey Condominium Motel Association, Inc.

2. The principal Redington Shore	l office address: 17880 Guif Blvd es, Fl 33708		
3. The mailing :	address (if different):		
4. Date of incor	poration/qualification: 09/14/1979 Decument number: 748924		
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	e	
	Pamela Cladakis		
	17046 Winner Cir Dr		
	Odessa. Fl 33556	1.07 h707	5
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office .	- - -	-
	Jonathan James Damonte	, AI	
	12110 Seminile Blvd	. 9: 23 	
	P.O. Box NOT acceptable	ω ω	
	Largo, FL 33778		

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.

ignature of an officer or director

Pamela Cladakis, President

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

If signing on behalf of an entity:

Jonathan James Damonte

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) ;