

# 754503

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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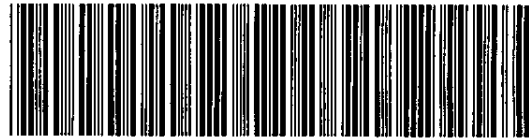
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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S R H L - L A W . C O M

MARIA VICTORIA ARIAS  
MARIAS@SRHL-LAW.COM

REPLY TO CORAL GABLES OFFICE

December 9, 2014

**VIA FEDERAL EXPRESS**

Division of Corporations  
Amendment Section  
409 E. Gaines Street  
Tallahassee, FL 32399

**RE: GLADEWIND HEIGHTS HOMEOWNERS ASSOCIATION, INC.  
("Association")**

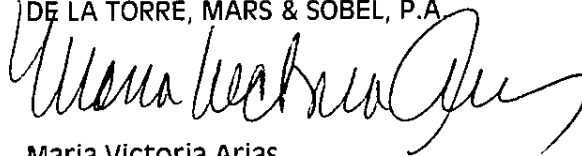
To Whom it May Concern:

The undersigned law firm represents Gladewind Heights Homeowners Association, Inc. ("Association"). Enclosed herewith are the original and a copy of the Statement of Change of Registered Office or Registered Agent or Both for Corporations ("Statement") and a check in the sum of Thirty-Five and No/100 Dollars (\$35.00). Please date stamp the copy and return to the undersigned in the enclosed self-addressed stamp envelope.

Should you require anything further, please do not hesitate to contact my office.

Very truly yours,

SIEGFRIED, RIVERA, HYMAN, LERNER,  
DE LA TORRE, MARS & SOBEL, P.A.



Maria Victoria Arias

MVA/blj  
Enclosures  
Cc: Manager  
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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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: GLADEWIND HEIGHTS HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: C/O THE FOSTER COMPANY OF SOUTH FLORIDA, INC. 9000 SW 152nd STREET, SUITE 102, MIAMI, FL 33157
3. The mailing address (if different):

4. Date of incorporation/qualification: 10/07/1980 Document number: 754503

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)

MICHAEL REHR, ESQ.
9500 SOUTH DADELAND BOULEVARD, SUITE 550
MIAMI, FL 33156

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

SKRLD, INC.
201 ALHAMBRA CIRCLE, 11th FLOOR
CORAL GABLES, FL 33134
P.O. Box NOT acceptable

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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.

X Elizabeth W. Hendrich ELIZABETH HENDRICH 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.

Signature of Registered Agent

12-8-2014 Date

If signing on behalf of an entity: Lisa A. Lerner
Typed or Printed Name

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