

755832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

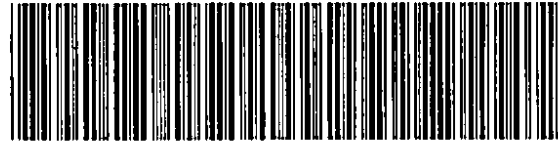
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 AUG 19 10 19 AM

August 19, 2020

TANIA MARA ZESIV
ATLANTICA CONDOMINIUM ASSOCIATION, INC.
100 CORAL WAY E #9
INDIALANTIC, FL 32903

SUBJECT: ATLANTICA CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 755832

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of the person signing the document must be typed or printed beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 220A00015778

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Atlantica Condominium Association Inc
Name of Corporation

DOCUMENT NUMBER: 755832 / FEI/EN number 59-2065
532

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:

Tania Mara Zesiv
Name of Contact Person

Atlantica Condominium Association Inc
Firm/Company

100 Coralway E #9
Address

Indialantic / FL 32903
City/State and Zip Code

E-mail address: (to be used for future annual report notification) taniazesiv7@gmail.com

For further information concerning this matter, please call:

(561) 856-4551 at () Tania Zesiv
Name of Contact Person 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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Atlantica Condominium Association, Inc.
- 2. The principal office address: 100 Coral way # 9, Indialantic, Florida, 32903
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 01/09/1981 Document number: 755832/59-2065532
- 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)

Low e, Greg A -
100 Coralway # 2, Indialantic,
FL 32903

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

Michael Tumminello (Michael Tumminello
100 Coralway E # 9, Indialantic, 32903
P.O. Box NOT acceptable
Florida.

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.

[Signature]

 Signature of an officer or director

FRES

 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]

 Signature of Registered Agent

6-30-20

 Date

If signing on behalf of an entity:

Tania Mara Zesiv

 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

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