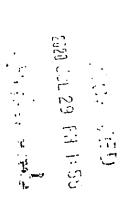
## A98000003535





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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	120000000	0195		
	REFERENCE	:	370704	4709638		
	AUTHORIZATION	:	Spell	Reman		
	COST LIMIT	:	\$ 35.00			
ORDER DATE :	July 29, 2020					
ORDER TIME :	11:23 AM					
ORDER NO. :	370704-005					
CUSTOMER NO:	4709638					
	· • • • • • • • • • • • • • • • • • • •			· • • • • • • • • • • • • • • • • • • •		
CHANGE OF AGENT						
NAME: GATEWAY CLUB APARTMENTS, LTD						
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FIL	ING:		
CERTIFIED COPY						
XX PLAIN STAMPED COPY						

EXAMINER:

CONTACT PERSON: Amanda Robinson -- EXT# 62968

## **COVER LETTER**

TO:	O: Registration Section Division of Corporations				
CHDI	IECT: Gateway Club Apartments,	Ltd			
SOD	Name of Limited Part	nership or Limited Liability Limited Partnership			
DOC	UMENT NUMBER:				
	nclosed Statement of Change of are submitted for filing.	Registered Office and/or Registered Agent and			
Please	e return all correspondence conce	erning this matter to:			
Beth ł	Kinsley				
	Contact Person	<del></del>			
North	land Investment Corporation				
	Firm/Company				
2150	Washington Street				
	Address				
Newto	on, MA 02462				
	City, State and Zip Co-	de			
bkinsl	ey@northland.com				
Е	-mail address: (to be used for future an	nual report notification)			
For fu	orther information concerning thi	s matter, please call:			
Beth k	Kinsley	at ( 617 ) 630-7254			
	Name of Contact Person	Area Code and Daytime Telephone Number			
Enclo	sed is a \$35.00 check made paya	able to the Florida Department of State.			
Maili	ng Address:	Street Address:			
	tration Section	Registration Section			
	on of Corporations	Division of Corporations			
	Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			
		Tallahassee, FL 32303			

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Gateway Club A	partments, Ltd				
N	ame of Limited Partnership or Li	mited Liability Limited Partners	hip		
2. November 9, 1998		3. A98000002525	3 A98000002525		
Date of filing/registration in Florida		Florida docun	Florida document number		
4. The name of the r Department of State:	egistered agent and the registered	office address as shown on the	records of the Florida		
	Kimberly Hill				
	Na	me			
	3930 Max Place				
Address					
	Boynton Beach, FL 33436				
	City, Stat	e and Zip			
5. The name and Flo	orida street address of the new reg	istered agent and/or office:	753 .F. 29		
	Corporation Service Compa	ny			
	Na	=======================================			
	1201 Hays Street		Nii 9: 41		
	Florida street address (F	.O. Box not acceptable)			
	Tallahassee	FL 32301			
	City, Stat	e and Zip			
6. Suebolsznych) ist Belle kinsley	are effective when filed by the F	lorida Department of State.			
Signature of General	Partner Assistant Secret	ary of Gateway GP LLC			
comply with the prov	ppointment as registered agent a isions of all statutes relative to the h an accept the obligations of m	e proper and complete perform			
Signature of Register	ed Agent	Amanda Rot Asst. Vice Pre	Dinson esident		

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50