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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:							

## REGISTERED AGENT CHANGE GOTHAM 55TH ST. PARKING CORP.

Certificate of Status	0
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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** Gotham 55th St. Parking Corp. Name of Corporation F00000001269 **DOCUMENT NUMBER:** 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: Lori Whalen Name of Contact Person Registered Agent Solutions, Inc. Firm/Company Corporate Center One, 5301 Southwest Pkwy, Ste 400 Address Austin, Texas 78735 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lori Whalen Name of Contact Person

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

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nnge is submitted for a corpo	502, 617.0502, 607.1508, or 61 oration organized under the law Jice or registered agent, or both	s of the State of New	w York	
1. The name of	the corporation: Gotham	55th St. Parking Corp.			<del>-</del>
2. The principal	office address:				-
	address (if different):		500000	24000	_
<ol> <li>Date of incor</li> </ol>	poration/qualification: 3/8/	2000 Document n	umber: FU000000	J1269	_
	rtment of State: (If resigned,	t registered agent and registered enter resigned)			
	1,00 - 1ht	ellistice	ig cht (con	Jan Y	
	1. 11ch 6:	55ee, (7 3)	36,3		
6. The name and (if changed):		egistered agent (if changed) and		2023 DEC -	~;~
	2894 Remington	Green Ln. Ste. A	· · · · · · · · · · · · · · · · · · ·	(C) - 1	Same excuses
	Tallahassee	P.O. Box NO1 acceptable FL 32308			m
The street address changed will	ess of its registered office at be identical.	nd the street address of the bus	iness office of its re	gisjered <b>ge</b> ent.	
Such change wa authorized by th	as authorized by resolution he board, or the corporation	duly adopted by its board of di has been notified in writing of	irectors or by an offi f the change.	cer so	
s/ Jaclyr	n Wright	Jaclyn Wright		thorized Per	son
•	the appointment as registed the appointment as registed to comply with the provision ad I am familiar with and ac ing filed merely to reflect a s been notified in writing of	Printe red ayent and agree to act in the ns of all statutes relative to the scept the obligation of my posit change in the registered office this change.	d or typed name and title his capacity, proper and comple tion as registered ag address, I hereby co	te performanc ent. Or if thi onfirm that the	re is e
	الل مرومه	11/29/2023			
	nature of Registered Agent		Date		
If signing on be	chalf of an entity:				
Mackenzie Hible	er, Assistant Secretary				
Т	yped or Printed Name				
	***	FILING FEE: \$35.00 * * *			