## NUCCCC3874

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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09/26/22--01004--015 \*\*35.00

2022 SEP 26 AH 10: 46
SECRETARY OF STATE



A. BUTLES

SEP 2 7 2022

## LAW OFFICE OF JONATHAN JAMES DAMONTE, CHARTERED

ATTORNEYS AT LAW

JONATHAN JAMES DAMONTE, B.C.S. BOARD CERTIFIED CONDOMINIUM & PLANNED DEVELOPMENT LAW

12110 SEMINOLE BOGLEVARD LARGO, FLORIDA 33778 TELEPHONE (727) 586-2889 FACSIMILE (727) 581-0922 www.damontelaw.com REAL ESTATE
MOBILE HOME PARKS
CONDOMINIUMS • COOPS
COMMUNITY ASSOCIATIONS
CORPORATIONS & BUSINESS LAW

September 22, 2022

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RE: Grosse Pointe Co-Op. Inc.

Document Number: N00000003874

To Whom It May Concern:

- 1) Please find enclosed the following:
  - A. Cover Letter:
- B. Check #25024 in the amount of \$35.00, made payable to the Department of State, which represents the fee for changing the Registered Agent for Grosse Pointe Co-Op, Inc.;
  - C. Statement of Change of Registered Agent:
- 2) Our office sent a similar request to the Division of Corporations which was received on August 17, 2022 including our check #25007 in the amount of \$35.00, but the request has not yet been processed. A copy of proof of delivery of the prior request and the prior check are enclosed. Please cancel the prior request and return the prior check to our office.

Should you have any questions, please do not hesitate to contact our office.

Thank you for your assistance in this regard.

Sincerely,

Paralegat

Enclosures as stated above.

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

CHOSSE BOINTE CO OR INC	
SUBJECT: GROSSE POINTE CO-OP, INC. Name of Corporation	
DOCUMENT NUMBER: N00000003874	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s 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	
janepronovost@gmail.com	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter,	please call:
Donna Damonte	at (727 )586-2889
Name of Contact Person	at (727 ) 586-2889  Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	ange is submitted for a corporation organ	)2, 607.1508, or 617.1508, Florida Statutes, nized under the laws of the State of Florida ered agent, or both, in the State of Florida.	this
	the corporation: GROSSE POINTE CO-O		
1. The name of	the corporation:  office address: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	ca virit v 88779 (3)	
		vay 19, Suite 7Q, New Port Richey, FL	34652
-	address (if different):		
4. Date of incor	poration/qualification: June 8, 2000	Document number: N00000003874	
	d street address of the current registered a rument of State: (If resigned, enter resigned	igent and registered office on file with the ed)	20
	Atlas Law		2022 SEP
	3902 N. Marguerite Street	——————————————————————————————————————	EP 26
	Tampa, FL 33603		42
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registered office	94 10: P2
	Jonathan James Damonte, Chartered		
	12110 Seminole Blvd.		
	P.O. Bo	v NOT acceptable	
	Largo, FL 33778		
The street address changed will	ess of its registered office and the street lbc identical.	address of the business office of its regist	ered agent.
Such change wa authorized by the	as authorized by resolution duly adopted he board, or the corporation has been no	d by its board of directors or by an officer stiffed in writing of the change.	so
	ionara A	Jane Pronovost, President	
Signatu	fre of an officer of diffector	Printed or typed name and title	
I hereby accept I furthér agree of my duties, an document is bet corporation has	t the appointment as registered agent an to comply with the provisions of all stat nd I am familiar with and accept the obl ing filed merely to reflect a change in th s been notified in writing of this change.	d agree to act in this capacity. utes relative to the proper and complete p igation of my position as registered agent, ie registered office address, I hereby confi	erformance Or, if this rm that the
\ multer	gnature of Registered Agent	Sept. 22, 2022	
- Sta	gnature of Registered Agent	Date	
If signing on be	chalf of an entity:		
Jonathan James i	Damonte, President		
T	yped or Printed Name		
	* * * FILING FI	EE: \$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)