N0000006846

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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Special Instructions to	Filing Officer:	
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COVER LETTER

TQ:

Amendment Section Division of Corporations

SUBJECT: CENTURY PARK CONDOMINIUM AS:	SOCIATION INC
Name of Corporation	occurrent, inc.
DOCUMENT NUMBER: N00000006846	
The enclosed Statement of Change of Registered O	ffice/Agent and fee are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
KEN TANINAKA	
Name of Contact Person	
Firm/Company	
4000 PONCE DE LEON BOULEVARD, SUITE 470	
Address	
CORAL GABLES, FL 33146	
City/State and Zip Code	
KTANINAKA@SKDRLAW.CO	OM .
E-mail address: (to be used for future annual re	port notification)
	•
For further information concerning this matter, plea	ase call:
KEN TANINAKA	379-1681
Name of Contact Person	at (305 379-1681 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the De	partment of State.
Mailing Address: Amendment Section	Street Address: Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu nge is submitted for a corporation organized under the laws of the State of FLOT to change its registered office or registered agent, or both, in the State of Florid	RIDA	
l. The name of t	he corporation: CENTURY PARK CONDOMINIUM ASSOCIATION, INC.		
	office address: 3934 S.W. 8TH STREET, SUITE 303, CORAL GABLES, FL 33134		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 10/16/2000 Document number: N0000000684	6	
5. The name and	street address of the current registered agent and registered office on file with the		_
	TANINAKA, KEN ESQ.		
	80 SW 8TH STREET, BRICKELL CITY TOWER SUITE 2550		
	MIAMI, FL 33130		3 : JP
6. The name and (if changed):	name and street address of the new registered agent (if changed) and for registered offic nanged):		ξ
	TANINAKA, KEN ESQ.		•
	4000 PONCE DE LEON BOULEVARD, SUITE 470	三 三 2	
	P.O. Box NOT acceptable CORAL GABLES, PL 33146		
The street addre	ss of its registered office and the street address of the business office of its reg	istered a	gent,
	e guthorized by resolution duly adopted by its board of directors or by an office of your the corporation has been notified in writing of the change.		
	ARLENE PEDRAYES / PRESIDENT		
1 / 11 -	Printed or typed name and title		_
$-\sqrt{\lambda}$	the appointment as registered agent and agree to act in this capacity. O comply with the provisions of all statutes relative to the proper and complete I am familiar with and accept the obligation of my position as registered agents filed merely to reflect a change in the registered office address, I hereby cobeen notified in writing of this change.	e perform ent. Or i nfirm thá	ance f this t the
f signing on bel	nailf of an entity:		
	* * * FILING.FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEF, FL 32314
CR2E045 (04/13)