N00999

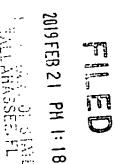
(R	equestor's Name)
(A	ddress)
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PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



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C. GOLDEN FEB 2.2 2019 Michael C. Góngora, Esq. Shareholder Board Certified Specialist, Condominium and Planned Development Law Phone: (305) 260-1014 Fax: (305) 442-2232 mgongora@beckerlawyers.com



Becker & Poliakoff 121 Alhambra Plaza 10th Floor Coral Gables, Florida 33134

February 18, 2019

Via U.S. Mail

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Gardens on the Bay Owners Association, Inc.

Dear Sir/Madam:

This firm represents Gardens on the Bay Owners Association, Inc. Enclosed please a letter of correspondence from you dated February 11, 2019 requesting clarification on the registered agent name. Also attached is the original Statement of Change of Registered Office or Registered Agent or Both for Corporations with the corrected requested information. The Registered Agent for the Association is Michael Gongora. Please make the appropriate changes on your records.

Should you have any questions regarding the foregoing, please do not hesitate to contact this office.

Thank you for your attention in this matter.

Sincerely,

Michael C. Góngora

Al hour courses

For the Firm

MCG/kir

cc: Gardens on the Bay Owners Association, Inc.

ACTIVE G25502/388487 11993656 1



February 11, 2019

MICHAEL C. GONGORA, ESQUIRE 121 ALHAMBRA PLAZA 10TH FLOOR CORAL GABLES, FL 33134

SUBJECT: GARDENS ON THE BAY OWNERS ASSOCIATION, INC.

Ref. Number: N00999

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):

Please clarify the registered agents name.

An individual must sign on behalf of the business entity you have designated as the registered agent.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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.

Claretha Golden Regulatory Specialist II

RECEIVED 19FEB 21 MHO: Letter Number: 119A00002944

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

statement of cha	orovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida rto change its registered office or registered agent, or both, in the State of Florida.	
	he corporation: Gardens on the Bay Owners Association, Inc.	
2. The principal office address: 6484 Indian Creek Dr., Office, Miami Beach, FL 33141		
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 01/18/1984 Document number: N00999	
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)	
	Savage, George ESQ	
	8603 S. Dixie Highway, Suite 218	
	MIAMI, FL 33143	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office.	
	Becker & Poliakoff, P.A., Attn: Michael C. Gongora, Esq.	
	121 Alhambra Plaza, 10th Floor	
	P.O. Box NOT acceptable Corol Cobles El 22124	
	Coral Gables, FL 33134	
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.	
School .	Educated Higher Honers Printed on title	
I hereby accept a I further agree to performance of a gent. Or, if thi	Printer by typed name and title the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete may duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I what the corporation has been notified in writing of this change.	
Signature of Registered Aged Date		
If signing on behalf of an entity:		
Typed or Printed Name Michael 68'NONA		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *