## NO3000001035

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: 360 Community Association, Inc.

Name of Corporation

DOCUMENT NUMBER: NO300001035

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:

John Paul Arcia

Name of Contact Person

John Paul Arcia, PA

Firm/Company

8700 West Flagler Street (Suite 355)

Address

Miami, Florida 33174

City/State and Zip Code

renni@arcialaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Arcia

<sub>.</sub>786 \_429-

Name of Contact Person

Area Code & Daytime Telephone Number

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of change is subm	f sections 607.0502, 617.0502, 607.1508, or 617.1508, Florid itted for a corporation organized under the laws of the State its registered office or registered agent, or both, in the State (	of	
1. The name of the corporati	on: 360 Community Association, Inc.		
	ss: 360 Community Association, Inc. d Drive, North Bay Village, Florida 33141		
3. The mailing address (if di	fferent): Same		
4. Date of incorporation/qua	lification: 02/06/2003 Document number: N03	3000001035	5
	ess of the current registered agent and registered office on file te: (If resigned, enter resigned)	e with the	
ATLAN	TIC & PACIFIC MANAGEMENT		
622 Bar	yan Trial, Suite 150		i Egg
Boca Ra	aton, Florida 33431		Selfer Fig.
6. The name and street addre (if changed):	ess of the new registered agent (if changed) and /or registered	i office	F CORPORT
John Pa	ul Arcia, PA		
8700 W	est Flagler Street, Suite 355		20 20
Miami, J	P.O. Box NOT acceptable		
The street address of its reg as changed will be identical	istered office and the street address of the business office o	of its registered a	agent,
Signature of an oricer of the approint	the corporation duly adopted by its board of directors or by the corporation has been notified in writing of the change.  Office  Protector  ment as registered agent and agree to act in this capacity, ith the provisions of all statutes relative to the proper and cond I am familiar with and accept the obligation of my positis being filed merely to reflect a change in the registered of	d title	
Signature of Registrer behalf of an e	ered Agent Date	14	
Typed or Printed	Name		

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