

N040000003244

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

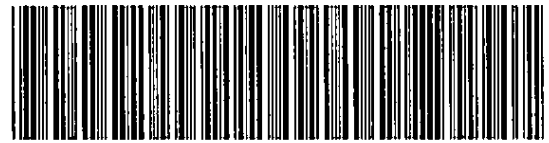
(Document Number)

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2022 MAY 23 PM 3:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: NIRVANA CONDOMINIUM NO. THREE ASSOCIATION, INC  
Name of Corporation

DOCUMENT NUMBER: N04000003244

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:

Mishaal Patel

Name of Contact Person

Legacy Law, P.A.

Firm/Company

150 SE 2nd Avenue, Suite 1410

Address

Miami, FL 33131

City/State and Zip Code

mishaalpatel@legacylawpa.com

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

For further information concerning this matter, please call:

Mishaal Patel

Name of Contact Person

at (305)

2399400

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NIRVANA CONDOMINIUM NO. THREE ASSOCIATION, INC
2. The principal office address: 703 NE 63RD STREET, MIAMI, FL 33138
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/29/2004 Document number: N04000003244
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SKRLD, INC.

201 ALHAMBRA CIRCLE - SUITE 1102 CORAL GABLES, FL 33134

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Legacy Law, P.A.


150 SE 2nd Avenue, Suite 1410

P.O. Box NOT acceptable

Miami, FL 33131

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

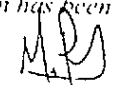
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

GLORIA MONTOYA

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
Signature of Registered Agent

05/13/2022

Date

If signing on behalf of an entity:

Mishaal Patel

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO THE STATE OF FLORIDA

FILED  
2022 MAY 23 PM 3:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA