NUS0000043/2

(Requestor's Name)	_
(Address)	_
(Address)	_
•	
(City/State/Zip/Phone #)	_
(<i>y</i>	
PICK-UP WAIT MAIL	
(Business Entity Name)	-
·	
(Document Number)	_
Certified Copies Certificates of Status	
Schindards of Status	-
	_
Special Instructions to Filing Officer:	
	l
	l
·	l
	l
	l

Office Use Only



400098827354

05/01/07--01040--005 **35.00



MRAIC

COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: Grovenor House Condominium (Name of Corporation	Association, Inc.					
DOCUMENT NUMBER: NOSOCCOUSIA						
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.					
Please return all correspondence concerning this matter to the fo	llowing:					
GARY M. MAIS						
(Name of Contact Person)						
Hyman Spector an	Id Mars, LLP					
(Firm/Company)						
150 West Flagler Street, 27 (Address)	Floor					
(Address)						
Miami El 33136						
Minmi, FL 33136 (City/State and Zip Code)						
For further information concerning this matter, please call:						
(Name of Contact Person) at (305) 371 - 4244					
(Name of Contact Person) (A	rea 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	Clifton Building					
Tallahassee, FL 32314	2661 Executive Center Circle					
	Tallahassee, FL 32301					

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 S statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Fl	Florida	<i>S</i>	-
1. The name of the corporation: Grovenor House Condominium Association, I	مدکی	_	
2. The principal office address: 2627 South Bayshore Drive	LL.	7 =	******
Coconut Grove , FL 33133	AHA 4T3	AY.	
3. The mailing address (if different):	SSE		t
	E OF	AM	
4. Date of incorporation/qualification: 4/26/05 Document number: NOSOO	00 5 431	Д .	
5. The name and street address of the current registered agent and registered office on file wit Florida Department of State:	<u> </u>	<u>8</u> ,	•
Murphy, Arthur J.	-		
701 Brickell Ave., ste. 3150			
MIAM: , FL 33131			
6. The name and street address of the new registered agent (if changed) and /or registered official (if changed):	ce		
Mars , Gary M.	•		
(P.O. Box NOT acceptable)	-		
MIAMI , FL 33130			
The street address of its registered office and the street address of the business office of it as changed will be identical.	s registere	ed ager	ıt,
Such change was authorized by resolution duly adopted by its board of directors or by an authorized by the board, or the corporation has been notified in writing of the change.	officer so	i	
(Signature of an officer or director) Oaved Shear (Printed or typed name and	 	<u>152</u>	-
- 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 con of my duties, and I am familiar with and accept the obligation of my position as registere document is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.	iplete per d agent. (by confirm	forman Or, if ti 1 that t	ıce his he
(Signature of Registered Agent) If signing on behalf of an entity:	<u>P001</u>	<u>'-</u>	_
Gary Mars Eq.			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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

-:--