Florida Department of State Division of Corporations

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Division of Corporations Fax Number : (850)617-6380

From:

Account Name : DIVINE & ESTES, P.A. Account Number : I20020000158 Phone : (407)426-9500 Fax Number : (407)426-8030

REGISTERED AGENT CHANGE

MANOR ROW AT PARK CENTRAL CONDOMINIUM ASSOCIATION, I

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APR. 9.2009 3:56PM DIVINE & ESTES, P.A.

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1.

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Manor Row at Park Central Condominium Association, Ig (Name of Corporation)

DOCUMENT NUMBER: N0600000154

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:

Asima M. Azam (Name of Contact Person)

Divine & Estes, P.A. (Firm/Company)

____<u>24 S. Orange Ave.</u> (Address)

Orlando, Florida 32802 (City/State and Zip Code)

For further information concerning this matter, please call:

Asima Azam at (407) 426-9500 (Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35,00 check made payable to the Department of State.

<u>Mailing Address:</u> 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

CR2E045(8/05)

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DIVINE & ESTES, P.A. APR. 9.2009 3:56PM (((H09000084196 3))) 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: Manor Row at Park Central Condominium Association, Inc. 2. The principal office address; 3. The mailing address (if different); Document number: N0500000154 4. Date of incorporation/qualification: 1/5/06 NO 600000154 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State; (If resigned, onter resigned) Laurie Cavito 5009 Park Central Drive Orlando, Florida 32839 6. The name and street address of the new registered agent (if changed) and /or registered office 5 (if changed): FILED Asima M. Azam, Esq. PH 1:47 24 S. Orange Ave (P.O. Box NOT accomable) Orlando, Florida 32802 The street address of its registered office and the street address of the business office of its registered agont, as changed vill be identice Such change was huthorized by resolution duly adopted by its board of directors or by an difficer so authorized by the board, or the corneration has been notified in writing of the change. 0/ D 6 CENTRAL OF WORL THOSe and bille billiner of direct 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. Thereby confirm that the corporation has been followed in writing of this change. (Signature of Registered Agent) If signing on behalf of an entity: TS IKIA AZAM (Typed of Printed Name)

NO.864

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

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

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