

N06 000002338

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# COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Bellagio Condominium Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N06000002338

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:

**Marilyn Byrd**

Name of Contact Person

Graham Legal, PA

Firm/Company

814 Ponce de Leon Blvd. Suite 410

Address

Coral Gables, FL 33134

City/State and Zip Code

eservice@grahamlegalpa.com

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

For further information concerning this matter, please call:

**Marilyn Byrd**

Name of Contact Person

at ( 305 ) 445-9185

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 24, 2020

MARILYN BYRD  
814 PONCE DE LEON BLVD  
SUITE 410  
CORAL GABLES, FL 33134

SUBJECT: THE BELLAGIO CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N06000002338

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):

The document must have original signatures.

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.

Querida R Moore  
Regulatory Specialist II

Letter Number: 220A00023700


**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: The Bellagio Condominium Association, Inc.
2. The principal office address: 421 NE 68th Street, Miami, FL 33138
3. The mailing address (if different): 2613 Seurat Terrace, Henderson, NV 89044
4. Date of incorporation/qualification: 03/01/2006 Document number: N06000002338
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)  
Peyton Bolin PL  
3343 West Commercial Boulevard, Suite 100  
Ft. Lauderdale, FL 33309
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
Graham Legal, PA  
814 Ponce de Leon Blvd, Suite 410  
Coral Gables, FL 33134 P.O. Box NOT acceptable

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

Miguel Ramos, President

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

12/16/2020  
Date

If signing on behalf of an entity:

Marilyn Byrd, Esquire for Graham Legal, P.A.

Typed or Printed Name

\*\*\* 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 (04/13)