N0600006084

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COVER LETTER

TO:

Amendment Section Division of Corporations

DOWNTOWN DADELAND CONDOMINIUM NO. SIX ASSOCIATION, INC.

Name of Corporation

DOCUMENT NUMBER: N0600006084

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:

James A. Stowers, Esq.

Name of Contact Person

Geosam Capital US (Venetian Bay) LP

Firm/Company

424 Luna Bella Lane, Suite 122

Address

New Smyrna Beach, FL 32168

City/State and Zip Code

youngt@armcocap.com

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

For further information concerning this matter, please call:

Trina Young

Name of Contact Person

Area Code & Davtime 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

CR2E045 (03/12)

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

		\$17.0502, 607.1508, or 617.1508, Florida Statutes, this no organized under the laws of the State of Florida	
	-	r registered agent, or both, in the State of Florida.	
1. The name of the	corporation: DOWNTOWN D	PADELAND CONDOMINIUM NO. SIX ASSOCIATION	ON, INC
		Street, E206, MIAMI, FL 33156	
			
3. The mailing adds	ress (if different):		
4. Date of incorpora	ation/qualification: 06/06/20	006 Document number: N06000006084	
5. The name and str Florida Departme	reet address of the current regis ent of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
<u>C</u>	ORPORATION SERVI	ICE COMPANY	
12	201 HAYS STREET		
<u>T,</u>	ALLAHASSEE, FL 323	301	SIVES
The name and str (if changed);	reet address of the new register	ed agent (if changed) and /or registered office	MIN NIE -3
<u>Ja</u>	ames A. Stowers, Esq.		_
42	24 Luna Bella Lane, St	uite 122	至一
\$1		Sox NOT acceptable	<i>o</i>
<u>N</u>	ew Smyrna Beach, FL	32168	_
The street address of as changed will be	of its registered office and the identical.	street address of the business office of its registered ag	ent,
Such change was at authorized by the b	uthorized by resolution duly acourt, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
Signature or	an officer or director	Steven Darrow - President	_ _
ו אוויווווו אוויווווווווווווווווווווווו	OMBIU WIIN THE BEAUTSIONS OF A	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I ified in writing of this change.	
		7/31/18	
	e of Registered Agent	Date	-
If signing on behalf	or an entity.		
Typed	or Printed Name		

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