NOGOOD

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



100267129341

12/05/14--01012--007 **35.00

COVER LETTER -

Amendment Section Division of Corporations

TO:

SUBJECT: Down bown Dodeland Condomic Name of Corporation	num No. Three Association, Inc.	
DOCUMENT NUMBER: NO600000137		
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:		
NICOLE Moder Name of Contact Person Company Moder Delay		
Swimmer + Molder PC Firm/Company		
11740 SW 80th Street, Ste 203		
MiAMI 52 33183 City/State and Zip Code		
Mode & Swamer Moder, com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
$\frac{\sqrt{(0.000 \text{ MoOC})}}{\text{Name of Contact Person}} \text{at } (\frac{300}{\text{Area Code & 1}})$	274 1272 Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Street Address: Amendment Section Amendment	dress:	
	ent Section of Corporations	
P.O. Box 6327 Clifton B	-	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute 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 Florida	X 10CC
1. The name of the corporation: Downtown Dodeland Condominum (2. The principal office address: 7270 SW 89 SWeet	Jo. Three
Mismi F 33156	
3. The mailing address (if different): Ob First Servere Residential 9015 Dodeland BIND., Ste Fice Miami F	2 33156
4. Date of incorporation/qualification: 6/6/06 Document number: NO6 00	000 6137
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) Summer + Moder PC	SECAL DIVISION
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Sulmer + Molder PL 11740 Sw 85th Street, Ste 203 P.O. Box NOT acceptable Miami & 33183	C-5 AM 9: 29
The street address of its registered office and the street address of the business office of its registas changed will be identical.	stered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board; or the corporation has been notified in writing of the change. COC Printed or typed name and title	r so
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 reagent. Or, if this document is being filed merely to reflect a change in the registered office add hereby confirm that the corporation has been notified in writing of this change. Signature of Registered Agent Agen	gistered ress, I
If signing on behalf of an entity:	
Typed or Printed Name	

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