N13000011076

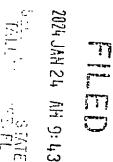
(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: 2121 West First Street Condominium Assoc Name of Corporation	siation, Inc
DOCUMENT NUMBER: N13000011076	
The enclosed Statement of Change of Registered Of	fice/Agent and fee are submitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Jeffrey Kushner	
Name of Contact Person	
2121 West First Street Condominium Association, Inc	
Firm/Company	
2121 West First Street	
Address	
Fort Myers, Florida 33901	
City/State and Zip Code	
neena@kushnerandkushner.com	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, pleas	se catl:
Neena Kushner	at (239 \) 560-9129
Name of Contact Person	at (239)560-9129 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Dep	partment 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

CR2E045 (04/13)

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Flordia error to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: 2121 West First Street Condominium Association I office address: 2121 West First Street, Fort Myers, Florida 33901
2. The principal	TOTICE address.
3. The mailing a	address (if different):
4. Date of incor	rporation/qualification: 12/12/2013 Document number: N13000011076
	d street address of the current registered agent and registered office on file with the utment of State: (If resigned, enter resigned)
	HL STATUTORY AGENT, INC.5811evardSuite 650Naples, FL 34108
	5811 Pelican Bay Boulevard, Suite 650
	Naples, Florida 34108
Naples, Florida 34108 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Neena Kushner	
	Neena Kushner
	2121 West First Street
	P.O. Box NOT acceptable Fort Myers, Florida 33901
7 71	
	ress of its registered office and the street address of the business office of its registered agent, I be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatu	Teffvey Kushner Printed or typed name and title
I hereby accept I further agree of of my duties, an document is bei corporation has	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
Sig	gnature of Registered Agent Date
If signing on be	thalf of an entity: **X PIS. remove Robert Corner as Title D
Т	Corper as Title D
	*** FILING FEE: \$35.00 *** *** FILING FEE: \$35.00 ***
M. CR2E045 (04/13)	*** FILING FEE: \$35.00 *** Make CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE At Same add [Ail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314