N170000 10208

(Requestor's Name)				
(Address)				
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<u> </u>				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Cartified Conice Cadificator of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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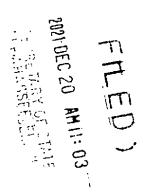
Office Use Only



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12/29/21--01030--006 **35.00

RATRO Charge



A. RAMSEY JAN 2 0 2022

Zuly Moran gave permission to add. 14345 SW57 LN #9 Mionii as the principal Office address

COVER LETTER

Amendment Section

TO:

Division of Corporations		t		
SUBJECT: The Townhomes on Coconut Palm Com Name of Corporation	munity Association, I	inc.		
DOCUMENT NUMBER: N17000010208		_		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this m	natter to the followi	ng:		
Zuly Moran				
Name of Contact Person				
Superior Management Solutions LLC				
Firm/Company				
P. O. Box 831193				
Address				
Miami, Fl 33283				
City/State and Zip Code				
zulymoran@att.net				
E-mail address: (to be used for future annual re	port notification)			
For further information concerning this matter, plea	ase call:			
Zuly Moran	at (⁷⁸⁶	277-6061 / 305-755-2495		
Name of Contact Person	Area Co	de & 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

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florid organized under the laws of the State of registered agent, or both, in the State of	f Florida	
1. The name of (The Tree of the contract of th	n Coconut Palm Community Association,		
2. The principal	office address: 14345 Sw	57 Lane #9, Miami, Fl	33183	
3. The mailing a	ddress (if different): PO Box 8	31193 Miami, FL 332	283	
4. Date of incorp	poration/qualification: 10/9/2017	Document number: N1700	0010208	
	I street address of the current regis tment of State: (If resigned, enter	tered agent and registered office on file resigned)	with the	
	Infiniti Management Group & Asso	c LLC	,	
	12911 SW 133 Court			
	Miami, Fl 33186		_ 700 %	
6. The name and (if changed):	street address of the new register	ed agent (if changed) and /or registered	office CARTAGO	
	Alex Borell, Esq.			
	319 Clematis Stret, Suite 200		基11:03	
P.O. Box NOT acceptable				
	West Palm Beach, Fl 33401			
The street address changed will	ess of its registered office and the be identical.	street address of the business office of	its registered agent,	
Such change wa authorized by th	7 1 '	dopted by its board of directors or by a een notified in writing of the change.	an officer so	
X Halla	il way	Haresh Pahilwani		
	to of an officer or director	Printed or typed name an	d title	
of my duties, an document is bei	the appointment as registered age to comply with the provisions of a d I am familiar with and accept to filed merely to reflect a change been notified in writing of this company.	ent and agree to act in this capacity. Il statutes relative to the proper and che obligation of my position as registe in the registered office address, I her hange.	omplete performance red agent. Or, if this reby confirm that the	
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:	· ,		
	ped or Printed Name			

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