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(Requestor's Name)						
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(OK) Otale/2 ph Hone #)						
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 814445 5157078

AUTHORIZATION :

COST LIMIT : \$/35.00

ORDER DATE: June 19, 2019

ORDER TIME : 3:40 PM

ORDER NO. : 814445-005

CUSTOMER NO: 5157078

CHANGE OF AGENT

NAME:

11 11 EAST RESIDENCES CONDOMINIUM ASSOCIATION,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER:

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	11 11 East Residences Condominium Association, Inc.	•
	Name of Corporation	. •
DOC	N18000013150 JMENT NUMBER:	
The er	nclosed Statement of Change of Registered Office/Agent and fee are submitted for f	iling.
Please	return all correspondence concerning this matter to the following:	
	Robert S. Wennett	
	1664 Lenox, LLC	
	Address	
	City/State and Zip Code	
	slopez@uiamanagement.com	
	E-mail address: (to be used for future annual report notification)	
For fur	ther information concerning this matter, please call:	
Suset	at (
	Name of Contact Person Area Code & Daytime Telep	hone Number
Enclos	ed 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	

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

statement of cha	inge is submitted for a cor	poration organized un	1508, or 617.1508, Florida der the laws of the State of ent, or both, in the State of	Florida		
	the corporation: 11 11 Eas		•	rioriaa.		
	office address: 1111 Line					
3. The mailing a	ddress (if different):					
4. Date of incorp	013150					
	street address of the current of State: (If resigned		d registered office on file w	ith the		
	1664 Lenox, LLC					
	1111 Lincoln Road, Suite	#760				
	Miami Beach		FL 33139			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	Corporation Service Com	pany	****			
1201 Hays Street P.O. Box NOT acceptable						
The street addre	ss of its registered office a be identical.	and the street address	of the business office of it	s registered agent,		
Such change was authorized by the	s authorized by resolution e board, or the corporatio	duly adopted by its to has been notified in	ooard of directors or by an writing of the change.	officer so		
		Suset	Lopez	Secretary		
	of priofficer or director		Printed or typed name and fill	ė		
t jurtner agree to performance of r agent. Or, if this hereby confirm t	the appointment as registed comply with the provision of the provision has been supported in the provision of the provision o	ons of all statutes rela ar with and accept th	to act in this capacity, itive to the proper and com e obligation of my position ange in the registered offic g of this change.	plete i as registered e address, I		
By:	le		loligha			
Sygna	ature of Registered Agent		1 Date			
If signing on beh	alf of an entity:	Lydia Cohen Asst. Vice President				
Тур	ped or Printed Name					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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