

119000009241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

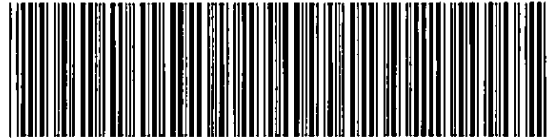
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2023 FEB 28 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

February 22, 2023

VIA USPS PRIORITY MAIL

Department of State  
Division of Corporations  
Amendment Section  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Document No. N19000009241 – Smart Brickell Condominium Association, Inc.

Dear Sir or Madam:

Enclosed please find Check No. 1226 in the amount of \$35.00 representing the fee the Statement of Change of Registered Office/Agent for the above referenced entity. Along with the fully completed Cover Letter and Statement of Change or Registered Office/Agent form.

Should you have any questions or concerns, feel free to contact our office.

Sincerely,

Aspuru Caraballo Faria P.A.



Maria C. Montes  
Post-Closing Paralegal

Enclosures

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SMART BRICKELL CONDOMINIUM ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N19000009241

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:

Maria C. Montes  
Name of Contact Person

Aspuru Caraballo Faria P.A.  
Firm/Company

135 San Lorenzo Avenue, Suite 850  
Address

Coral Gables, FL 33146  
City/State and Zip Code

mmontes@acf-law.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria C. Montes at ( 786 ) 783-0009  
Name of Contact Person Area Code & 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

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SMART BRICKELL CONDOMINIUM ASSOCIATION, INC.
2. The principal office address: 175 SW 7 Street, Suite 2201, Miami, FL 33130
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 9/5/2019 Document number: N19000009241
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)

Registered Agents of Florida, LLC

100 SW Second Street, Suite 2900

Miami, FL 33131-2130

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

FL Corporate & Tax Services, LLC

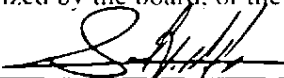
135 San Lorenzo Avenue, Suite 850

P.O. Box NOT acceptable

Coral Gables, FL 33146

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

**Santiago Vanegas - MGR**

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. 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 registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

2-12-2023

Date

If signing on behalf of an entity:

VIVIANA E. ASPURU

Typed or Printed Name

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