

N 19505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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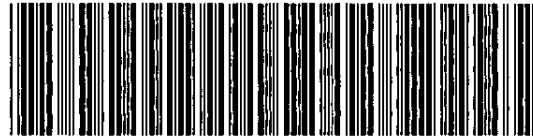
(Business Entity Name)

(Document Number)

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C. MUSTAIN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KEYS GATE COMMUNITY ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N19505

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:

KIERAN FALLON

Name of Contact Person

KIERAN P. FALLON, P.A.

Firm/Company

1101 BRICKELL AVENUE STE.1101 NORTH TOWER

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

FALLON@KFALLONLAW.COM

CR2E045 (03/12)

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KIERAN P. FALLON

Name of Contact Person

at **305 961-2900**

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

CR2E045 (03/12)

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
JAN 10 2012
FALLON@KFALLONLAW.COM

**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: KEYS GATE COMMUNITY ASSOCIATION, INC.
2. The principal office address: 1541 SE 12 AVENUE # 37 HOMESTEAD, FLORIDA 33034
3. The mailing address (if different): 1101 BRICKELL AVENUE STE 1101 NOTH TOWER MIAMI, FLORIDA 33131
4. Date of incorporation/qualification: 03/03/1987 Document number: N19505

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)

KIMBERLY GREEN

888 KINGMAN ROAD

HOMESTEAD, FLORIDA 33035

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

KIERAN P. FALLON, ESQUIRE

1101 BRICKELL AVENUE STE .1101 NORTH TOWER

P.O. Box NOT acceptable

MIAMI, FLORIDA 33131

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]
Signature of an officer or director

Kimberly Green
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]
Signature of Registered Agent

11/05/2012
Date

If signing on behalf of an entity:

KIERAN P. FALLON

Typed or Printed Name

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

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