N9500003012

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

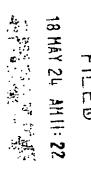
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COVER LETTER

TO: Amendment Section Division of Corporations Summit Tower I of Dadeland Condominium Association Name of Corporation 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: Angela Aspra **Advance Management Solutions** Firm/Company 9010 SW 137th Ave Suite 231 Address Miami, FL 33186 City/State and Zip Code advancemanagementsolutions@ymail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 305 383-7132
Area Code & Daytime Telephone Number Angela Aspra Name of Contact Person

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nange is submitted for a corporation organized under the laws of the State of Florida	; ,i
·	ler to change its registered office or registered agent, or both, in the State of Florida.	il
1. The name of	the corporation: Summit Tower I of Dadeland Condominium Association	n, INC.
	al office address: 9010 SW 137th Ave Suite 231	<u> </u>
	Miami, FL 33186	! ———————————————————————————————————
3. The mailing	address (if different): Same	
		1
4. Date of incor	prporation/qualification: May 1995 6/2 5/1995 Document number: N95000003012	-
5. The name an	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	i.
	Advance Management Solutions, Inc.	
	9010 SW 137th Ave Suite 231	<u>;</u>
	Miami, FL 33186	, ,
6. The name an (if changed):	nd street address of the new registered agent (if changed) and for registered office Reinaldo Castellanos	THE ED
	9960 Bird Road PO Box NOT acceptable)
	Miami, FL 33165	•
The street added	fress of its registered office and the street address of the business office of its registered and the identical.	gent.
Such change wauthorized by	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Signal	OUR JUNUALLY WINTER Printed or typed name and title	(RESIDENT
I further agree	pt the appointment as registered agent and agree to act in this capacity. e to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as registered this document is being filed merely to reflect a change in the registered office address, I of that the corporation has been notified in writing of this change.	<i>I</i>
X	Ladttien 5/15/18	*1
Ś	Signature of Registered Agent Date	
If signing on b	behalf of an entity:	
Keina	aldo Castellanos	01

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

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Typed or Printed Name