

N-15000006514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

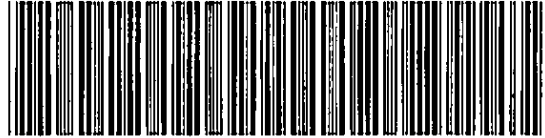
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DEPARTMENT OF CORPORATION
2022 SEP -2 AM 11:59

J. DENNIS

DEC 09 2022

TO: Amendment Section
Division of Corporations

SUBJECT: South Beach Residences Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N98000006814

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:

Concepcion Gonzalez
Name of Contact Person
South Beach Residences Condominium Association, Inc.
Firm/Company

831 107th St. Apt 12
Address

Miami Beach, FL 33139
City/State and Zip Code

ccokani46@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Concepcion Gonzalez at (305) 778-7100
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Goth Beach Residences Condominium Association, Inc.

2. The principal office address: 831 10TH ST. Apt 12, Miami Beach, FL 33139

3. The mailing address (if different): _____

4. Date of incorporation/qualification: Mar. 29, 1999 Document number: N98000006814

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)

Jack D. Johnson

831 10TH ST. Apt 5

Miami Beach, FL 33139

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

Ron Davidson

831 10TH ST. Apt 7

P.O. Box NOT acceptable

Miami Beach, FL 33139

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

Concepcion Gonzalez

V.P. & Treasurer

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

August 27, 2022

Date

If signing on behalf of an entity:

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 (04/13)