N98000007116

(Requ	uestor's Name)			
(Addr	ess)			
(Addr	ess)			
(City/	State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Busi	ness Entity Na	me)		
• •	_			
· (Doct	ıment Number))		
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SECRETARY OF STATE
ALL AHASSEE, FLORID

Phone

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

-	•	7.0502, 607.1508, or 617.1508, Flori organized under the laws of the State	
		registered agent, or both, in the State	
1. The name of the cor	poration: Doral G	ark Country Club A	Association, Inc.
2. The principal office	address: <u>5001</u> NU	N 104th Avenue	
	,	lorida 33178	
3. The mailing address	s (if different): 5001 1	NW 104th Avenue	
		Jorida 33178	
4. Date of incorporation	on/qualification: <u>/2/17</u>	1998 Document number: N	98000007116
5. The name and street Florida Department		ered agent and registered office on file	e with the
	Paul O	'Sell	-
	5001 NW	104th Ruenve	TAL SE
	Doral, FLO	rida 33178	FIL CRETY
6. The name and street (if changed):	-	d agent (if changed) and /or registered	office SSEE, T
·	Jose Go	arcia 104th Avenue optable) rida 33178	
	5001 NW	104th Avenue	₽m -
	(P.O. Box NOT acco	eptable)	
	Doral, Mo	riaa 33178	
The street address of as changed will be ide	its registered office and the sentical.	street address of the business office	of its registered agent,
Such change was auth authorized by the boa	norized by resolution duly ad rd, or the corporation has be	lopted by its board of directors or by en notified in writing of the change	y an officer so
IM Jan		Jose Gare	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Officer or director)	(Printed or typed name	and tiffe)
- I further agree to con	inly with the provisions of al	ent and agree to act in this capacity, Il statutes relative to the proper and we obligation of my position as regis win the registered office address, I h ange.	complete performance
&/ll aus	. *	1-27-0	フ、
(Signature	of Registered Agent)	(Date)	
If signing on behalf o	•		
Jose Ga			
(Typed or	Printed Name)		

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