

1799000006589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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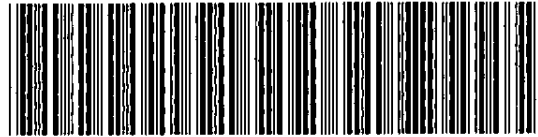
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 11 2017
T. LEMIEUX

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Paradise Point Marina Condominium Assoc., Inc.
Name of Corporation

DOCUMENT NUMBER: N99000006589

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:

Omaida Arbide

Name of Contact Person

Paradise Point HOA, Inc.

Firm/Company

6111 Paradise Point Drive

Address

Palmetto Bay, FL 33157

City/State and Zip Code

pm@rhycparadise.com

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

For further information concerning this matter, please call:

Omaida Arbide

Name of Contact Person

at (305) 232-6526

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: Paradise Point Marina Condominium Assoc., Inc.
2. The principal office address: 5830 Paradise Point Drive, Village of Palmetto Bay, FL 33157
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/08/1999 Document number: N99000006589
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)

Peter G. Gruber, P.A.

18001 Old Cutler Road, Suite 600

Miami, FL 33157

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

Peter G. Gruber, P.A.

7875 SW 104 Street, Suite 100

P O Box NOT acceptable

Miami, FL 33156

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.

Ron Zelhof
Signature of an officer or director

Ron Zelhof, President

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.

Peter G. Gruber
Signature of Registered Agent

March 14, 2017

Date

If signing on behalf of an entity:

Typed or Printed Name

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