

PD9 000000582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

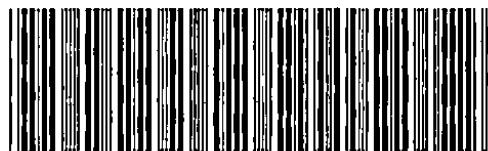
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEP 18 2019
TALLAHASSEE, FL

2019 SEP 18 AM 9:03

SEP 17 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Team Condo

Name of Corporation

DOCUMENT NUMBER: P09000005822

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:

Joseph T. Martin

Name of Contact Person

Team Condo

Firm/Company

1915 Temple Ave

Address

Merritt Island, FL 32953

City/State and Zip Code

jeffrey.martin61@gmail.com

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

For further information concerning this matter, please call:

Joseph T. Martin

Name of Contact Person

at (321) 243-3536

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
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, 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: Team Condo
2. The principal office address: 1915 Temple Ave, Merritt Island, FL 32953
3. The mailing address (if different): _____
4. Date of incorporation/qualification: _____ Document number: P0900000588
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)

Curtis Hynes

2150 Topaz Court

Merritt Island, FL 32953

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

Joseph T. Martin

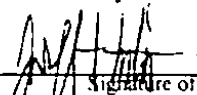
1915 Temple Ave

P.O. Box NOT acceptable

Merritt Island, FL 32953

The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

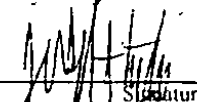
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Joseph T. Martin, 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.


Signature of Registered Agent

Date

If signing on behalf of an entity:

Joseph T. Martin

Typed or Printed Name

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