

P09000023258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

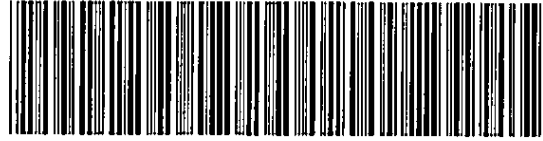
(Business Entity Name)

(Document Number)

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2019 OCT 18 PM 5:07
of
TALLAHASSEE, FL

OCT 18 2019
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 30, 2019

GLENN SCHEUERMANN
918 GRAVIER ST
NEW ORLEANS, LA 70112

SUBJECT: AIRPORT PARKING OF MIAMI, INC.
Ref. Number: P09000023258

We have received your document for AIRPORT PARKING OF MIAMI, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly. **DONE**

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned. **DONE**

If you have any questions concerning the filing of your document, please call (850) 245-6050.

SEE ATTACHED →

Catherine M Wood
Regulatory Specialist II

Letter Number: 419A00020134

RECEIVED

2019 OCT 18 PM 2:36

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AIRPORT PARKING OF MIAMI, INC.
Name of Corporation

DOCUMENT NUMBER: P09000023258

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:

GLENN SCHEWERMANN
Name of Contact Person

PMSI
Firm/Company

918 GRAVIER ST.
Address

NEW ORLEANS, LA 70112
City/State and Zip Code

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

For further information concerning this matter, please call:

GLENN SCHEWERMANN at (504) 566-1000
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
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: AIRPORT PARKING OF MIAMI, INC.
- 2. The principal office address: 918 GRAVIER ST.
NEW ORLEANS, LA 70112
- 3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/12/2009 Document number: PO9000023258

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)

BRANDON J. MARTON
1800 N. PINE ISLAND RD. #118
PLANTATION, FL 33322

2019 OCT 18 PM 5:07
TALLAHASSEE, FL

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

GLENN SCHEUERMANN
C/O STEPHANIE LIEB, ESQ.
101 E. KENNEDY BLVD #2700, TAMPA, FL 33602

P.O. Box NOT acceptable

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

THOMAS B. GIGLIOTTI, JR.
Printed or typed name and title
PRESIDENT

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

9/11/19
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