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ALLAHASSEE, FLORIDA



COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: 2500 Receiver, Inc.

Name of Corporation

P10000060480

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:

Robert G. Bello, Esq.

Name of Contact Person

Grand Palms Resort

Firm/Company

110 Grand Palms Drive, Legal Dept

Address

Pembroke Pines, FL 33027

City/State and Zip Code

robert@grandpalmsresort.com

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

For further information concerning this matter, please call:

Robert G. Bello, Esq. at 914 374-3151

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

statement of che	provisions of sections 607,0502, ange is submitted for a corporation or to change its registered office o	on organized under the	laws of the State of	Florida
1. The name of	the corporation: 2500 Receiv	ver, Inc.		
2. The principal	Loffice address: 2500 Hallan	dale Beach Blvd		
		Beach, Florida, 33	3009	
3. The mailing a	address (if different):			
4. Date of incor	poration qualification: 07/22/2	2010 Docume	ent number: P1000	00060480
	d street address of the current reg artment of State: (If resigned, ente	•	ered office on file w	with the
	James Saunders, III, E	sq.		_
	15757 Pines Blvd., Sui	te 119		
	Pembroke Pines, FL 33	3027		-
6. The name and (if changed):	d street address of the new registe	ered agent (if changed)	and /or registered o	ffice
	Robert G. Bello, Esq.		. 2019 SEL	_
	Grand Palms Resort, L	<u> </u>	MOV MIAS	
	110 Grand Palms Dr. F	Box NOT acceptable Pembroke Pines I	FL 33027	_ [
The street address changed will	ess of its registered office and th I be identical.	e street address of the	business of fice of i	ts registered agent.
Such change was authorized by the	as authorized by resolution duly he board, or the corporation has	adopted by its board o been notified in writin	of directors or by an	officer so
. My	the first other or director		gall, President	īle
I birther aoree	t the appointment as registered a to comply with the provisions of i my duties, and I am familiar wi its document is being filed merel that the Gorporation has been n	fall statutes relative to	the maner and car	nplete n as registered ce address, I
	July July	10/21/201	19	
	gnarthe of Registered Agent		Date	
т	Typed or Printed Name	_		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, F1, 32314

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