

P11000072105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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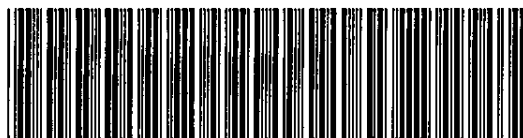
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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11-3-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Manor Grove Management, Inc
Name of Corporation

DOCUMENT NUMBER: P11000072105

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:

Nathan Miller
Name of Contact Person

Manor Grove Management
Firm/Company

12 North East 19th Court Suite A 221
Address

Wilton Manors, Florida 33305
City/State and Zip Code

nathan@mg-mgt.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nathan Miller at (954) 530-4912
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 19, 2011

NATHAN MILLER
MANOR GROVE MANAGEMENT, INC.
12 NORTH EAST 19TH COURT, SUTIE A 221
WILTON MANOR, FL 33305

SUBJECT: MANOR GROVE MANAGEMENT, INC.
Ref. Number: P11000072105

We have received your document for MANOR GROVE MANAGEMENT, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent must sign accepting the designation.

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

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 511A00023980

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: Manor Grove Management, Inc.
2. The principal office address: 12 North east 19th Court Suite A 221
Wilton Manors, Florida 33305
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: August 2011 Document number: P11000072105
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)

Gary David Brady, CPA

1040 Bayview Drive

Fort Lauderdale, Florida 33304

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

Manor Grove Managment / NATHAN MILLER

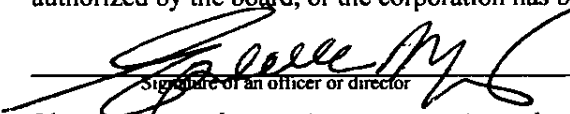
12 North East 19th Court Suite A 221

P.O. Box NOT acceptable

Wilton Manors, Florida 33305

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

Estelle Miller

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

10/06/11

Date

If signing on behalf of an entity:

NATHAN MILLER
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
CR2E045 (8/05)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA